## The ACPRC editorial board: driving high-quality of care, for people with respiratory problems

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The ACPRC editorial board was established in 2019 with the purpose of leading the scoping, commissioning, co-ordination and delivery of all new ACPRC guidance documents and resources. The purpose of the documents and resources is to facilitate knowledge sharing and drive improvements in the quality of care for respiratory patients. And what a fantastic job the board and topic teams have done in the last four years, which of course included a global pandemic with respiratory physiotherapy being at the forefront of healthcare.

The initial hot topics were lung ultrasound, blunt chest trauma, physiotherapy management of people post cardiac thoracic and cardiac surgery and airway clearance in adults who were intubated. Each of the topic leads co-ordinated and supported a team to scope the literature in the relevant areas and then decide the type of document that would best summarise the information and provide guidance for the ACPRC members. The output of the board over the last four years has been a commentary (1), a position statement (2) and four scoping reviews (3, 4, 5, 6). These outputs have only been possible due to the incredibly hard work, of the topic leads and teams.

So, what have we learnt from the first round of topics? Each task was a lot bigger than anticipated! This was particularly so for the scoping exercise, and advice for future topic leads is to have a streamlined process for the search, for example Joanna Briggs Institute, and set aside more time than you would think to read and extract data from each study. Deadlines were difficult to keep with other work priorities especially COVID-19, so flexibility and getting the right people at the right time is needed to ensure that the task does get finished. Having a mix of clinicians and academics on the teams was very helpful to provide a broad skill set. Going forward, we could be more explicit about the skills, experience and realistic time availability when recruiting team members. This does not mean that all team members need to be highly experienced in every aspect of the process – all ACPRC members have the skills that are needed, and support is there for you to develop.

Each output has research recommendations, some highlights are: the use lung ultrasound outside critical care, effect of positioning for airway clearance in the intubated adult, cost effectiveness of physiotherapy post-surgery, and qualitative studies exploring patient and staff experiences.

And so, we move to the next round of topics and a new chair to guide the board and teams in their work. Congratulations to Agnieszka Lewko in being appointed new chair of the board. The new topic teams are led by Izzie Easton – *dysfunctional breathing pattern*; Stephanie Mansell – *simulation*, and Agnieszka Lewko – *inspiratory muscle training*. These topics are shaping up to produce some very exciting resources to support ACPRC members.

I have thoroughly enjoyed my four years as chair of the editorial board, learning more about evidence-based healthcare and working with wonderful people. I have no doubt of the excellent value of these resources for ACPRC members in all areas of their work and in supporting students and newly qualified physiotherapists as they pursue their careers.

## References

- Wade C., Battle C, Barrett-Brown Z, Haylett R, Leat R, Jones U. Physiotherapy following blunt chest trauma. ACPRC Journal. 2019;53(2):187–190. <a href="https://www.acprc.org.uk/publications/acprc-journal/2021-journal-vol-53-issue-2/association-of-chartered-physiotherapists-in-respiratory-care-commentary:-physiotherapy-following-blunt-chest-trauma/.">https://www.acprc.org.uk/publications/acprc-journal/2021-journal-vol-53-issue-2/association-of-chartered-physiotherapists-in-respiratory-care-commentary:-physiotherapy-following-blunt-chest-trauma/.
- 2 Gustafson O, Hayward S, Helmsley A, Grant J, Smith M, Tait C, Pickering N, Hardy J, Atkin K, Jones U. ACPRC Journal. Association of Chartered Physiotherapists in Respiratory Care position statement: Physiotherapists use of lung ultrasound. ACPRC Journal. 2021;53(2):147–150. <a href="https://www.acprc.org.uk/Data/Resource\_Downloads/PhysioLUS-COVID-19.pdf?date=17/03/2020%2021:55:53">https://www.acprc.org.uk/Data/Resource\_Downloads/PhysioLUS-COVID-19.pdf?date=17/03/2020%2021:55:53</a>.
- Cork G, Wade C, Gordon A, Vaughan-France A, Palmer A, Walker K, Jones U. Airway clearance techniques for the intubated adult: a scoping review. ACPRC Journal. 2022;54(3):120–139. https://rc.rcjournal.com/content/65/8/1174.
- 4 Eden A, Matthews E, Page A, Easton I, Jones U. Association of Chartered Physiotherapists in Respiratory Care scoping review: Post-operative physiotherapy in people undergoing cardiac surgery. ACPRC Journal. 2023;55(1).
- Eden A, Gilbert N, Bendall A, Easton I, Lewko A, Page A, Tait C, Jones U. Association of Chartered Physiotherapists in Respiratory Care scoping review: Post-operative physiotherapy in people undergoing thoracic surgery. ACPRC Journal. 2022;54(1):89–113. https://www.acprc.org.uk/publications/acprc-journal/2022-journal-vol-54-issue-1/association-of-chartered-physiotherapists-in-respiratory-care-scoping-review:-post-operative-physiotherapy-in-people-undergoing-thoracic-surgery/.
- Grafton K, Wheldon C, Stiger R, Robbins N, Baker C, Jones U. Association of Chartered Physiotherapists in Respiratory Care scoping review: Post-operative physiotherapy management in upper gastrointestinal (GI) surgery. ACPRC Journal. 2022:54(2):92–106. https://www.acprc.org.uk/publications/acprc-journal/2022-journal-vol-54-issue-2/

 $\frac{association-of-chartered-physiotherapists-in-respiratory-care-scoping-re-view:-post-operative-physiotherapy-management-in-upper-gastrointestinal-gi-surgery/. \\$