

IMS3



The West Leicestershire Respiratory Upskilling Programme

East Midlands Respiratory Programme

2016

Background

Lung disease places a huge burden on health services. It is responsible for over 700,000 hospital admissions and more than 6.1 million hospital bed days in the UK each year.

There are around 1.4 million people living with diagnosed COPD, considerably more than the 835,000 estimated by the Department of Health in 2011. In terms of diagnosed cases, this makes COPD the second most common lung disease in the UK, after asthma. Around 2% of the whole population – 4.5% of all people aged over 40, 115,000 people are diagnosed with COPD each year, equivalent to a new diagnosis every five minutes

Asthma numbers are around 3.8m on our QoF register so a common condition that can be poorly managed as evidenced by the NRAD report (May, 2014).

With both conditions there is high morbidity and higher than expected mortality with the enquiry into respiratory deaths by the APPG of respiratory health (June, 14) noting the following recommendation:

“Ensure high, consistent standards of training and competency assessment for all healthcare professionals treating people with respiratory conditions.”

Objective

The West Leicestershire Clinical Commissioning Group (WLCCG) Upskilling programme was therefore devised to look at competency in respiratory management for healthcare professionals at a practice level recognising that the majority of care for asthma and COPD is undertaken in general practice.

Aims

- To increase skills and awareness in diagnosing respiratory disease
- To provide up to date knowledge of management of asthma / COPD
- To increase provision of management/action plans to patients
- To improve access and referral to stop smoking services
- To increase referrals to pulmonary rehabilitation and to encourage advice about active lifestyle
- To update on new inhalers and assure competence in teaching
- To improve understanding of pharmacological guidelines
- To discuss end of life care for respiratory patients
- To understand the management of complex COPD patients and the referral pathway
- To work together as a respiratory community

Method

A 4 module training package for practice nurses and GPs to educate and assess competencies using the following acronym:

SIMPLE (Stop smoking, Inhaler Technique, Monitoring, Pharmacotherapy, Lifestyle, Education)

Module 1	<ul style="list-style-type: none"> ▪ Diagnosis of asthma, COPD and the breathlessness clinical pathway. ▪ Stopping Smoking
Module 2	<ul style="list-style-type: none"> ▪ Pulmonary Rehabilitation ▪ Spirometry ▪ Self-Management
Module 3	<ul style="list-style-type: none"> ▪ Inhaler technique ▪ Pharmacotherapy
Module 4	<ul style="list-style-type: none"> ▪ Advanced COPD ▪ End-of-Life Care

These took place as evening meetings scheduled for 2.5 hours and with a buffet prior to the start. The package ran three times to enable attendance at all events.

The main organisers were:

Dr Darren Jackson- GP and Clinical Responsible Officer, Long Term Conditions, Better Care Together LLR

Professor Anna Murphy- Consultant Respiratory Pharmacist

Ms Jane Scullion- Consultant Respiratory Nurse

Supported by Mr J Cooke- CCG management support

Costs

The total cost of the programme was around £15k for the three packages and there was representation from all practices, including many GPs (120 total participants). A consortium of pharmaceutical companies provided around half of the sponsorship paying for the venue and food as part of an educational grant, but with no input into the actual programme. The remainder of the funding was picked up by the CCG mainly speaker expenses and fees, and practical aids such as spirometry and inhaler booklets and bags with placebo devices.

Incentives

10 hours of CPD points, a year's practice membership to the Primary Care Respiratory Society (PCRS) and a requirement by practices for the CCG QIPP scheme.

Results

Skills and knowledge were assessed prior to the modular programme and after in a series of MCQs and practical assessments i.e. reading spirometry results.

As can be seen by the results of the pre and post exam the clinicians involved in the up-skilling programme drastically improved their overall skills and awareness.

	Pre-course Mean (%) Range (%)	Post-course Mean (%) Range (%)	% Difference (mean)
Overall (max 128)	67-101 [52-79%] 84.2 [65.7%]	83-119 [65-93%] 106.8 [83.4%]	+ 26.8%

Furthermore the improvements in knowledge in different areas could be noted.

COPD (max 65)	50-63 [77-97%] 57.2 [88%]	53-64 [82-98%] 59.7 [91.8%]	+ 4.4%
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Asthma (max 14)	1-9 [7-64%] 5 [35.7%]	3-13 [21-93%] 7.8 [55.7%]	+ 56%
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Spirometry (max 14)	2-14 [14-100%] 8.4 [60%]	4-14 [29-100%] 11.7 [83.5%]	+ 39%
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Other (max 35)	5-19 [14-54%] 13.5 [38.6%]	15-33 [43-94%] 27.6 [78.9%]	+ 104%
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Other was medication, device use, smoking cessation and spirometry interpretation etc.

Top tips you need:

- ✓ A **Hook** to get people to attend
- ✓ Timing is everything
- ✓ An appropriate venue
- ✓ You need to know it was worthwhile i.e. assess competency before and after and evaluate
- ✓ An enthusiastic group of local clinicians