

Manaaki Hauora-Supporting Wellness
Learning Session 3
Tuesday 10 November 2015

Collaborative Name: Huff and Puff



Aim

To design and implement a reliable screening, referral and intervention pathway for 50 individuals aged over 35 years within the Manukau Locality to enable the early diagnosis of breathing problems and the support of self-management by June 2016.

Change Package

Secondary drivers (Theory of change)	Change concepts & change ideas tested	Evidence of Improvement
Awareness of sessions	Use of posters to advertise testing within the community hub. Potential participants needed to be able to relate to the poster. "One size doesn't fit all".	Posters have been redesigned for each community hub (see PDSA).
Suitable facilities	Through testing it has been established that there is a minimum requirement for space, equipment and facilities for suitability.	Tool box checklist developed (see PDSA).
Relationship with business	Having a pre-established relationship with the business is helpful ("a foot in the door"). Arranging pre visits to each site to discuss aim of project and the need to prove that the project is worthwhile.	Site visit checklist developed: one pager overview of project; copies of consent; participant questionnaire and poster to share with the business. Project team know their individual roles and responsibilities within the meeting.

Date of screening:
Location:
See reception for further
information

Healthy Lungs for Life? Come and find out how healthy your lungs really are.



Who can we test?

- Smokers and ex smokers over 35years old

What do you need to do?

- The breathing test is done sitting down. It tells us how hard, fast and how much air you can breathe out.

How long will it take?

- Approximately 15 minutes

Raising awareness of the importance of healthy lungs and early diagnosis of breathing problems in Counties Manukau Health

Huff and Puff Spirometry Box Checklist

Date Checked			
Date Restocked			
	Qty	Tick	Notes
Nurse/Participant – Introduction			
-Tape measure	1		
-Inhaler picture slide	2		
-Clip Board	10		
Spirometry (Dr/Health Physiologist/?)			
- Disposable cups	20		
-Bottled water	2		
-Plastic bags/bin liners	2		
-Spirometer	1		
-Multiple spirometer mouth pieces	30		
-Thermal paper – spare	1		
-Tissues for patients	1		
-Handtowels	1		
-Gloves	20		
-Alcohol wipes	lots		
-Patient stickers	20+		
For Participants			
- Consent forms for taking photos	20		
-Living Smoke Free information leaflets	20		
-Pens & Lanyards for participants	?		
-Quit cards (Dr only?)	20		
Documentation			
- Consent	20		
- data collection,	20		
-GP letter	20		
-GP Survey	20		
-Hospital Envelopes for GP Letters	20		
-Prepaid envelopes for GP Survey	20		
Extension cable	1		
Pens for staff	5		
Black marker	2		
Paper clips	lots		
Post it Notes	1		
Paper/note book	1		

Most successful PDSA cycle

Which PDSA provided the most learning.....Vodafone (Sept)

- Pre-established relationship between project team member and the business provided an opportunity to gain access which otherwise would have been difficult.
- “Be prepared” – everyone assumed that the other project members would bring the relevant tools and equipment. EG scales; tape measure; supply of tissues.
- A portable tool box has been created with a checklist to ensure nothing is forgotten next time!
- Follow up for participants who wanted to quit – a rethink of the role of QuitBus/Smokefree Living team.

Patient & Whaanau Stories

43yrs old female: *Normal reading*

Quit on her husband's birthday 6 months previously.

“Did it for my son”

Next goal is to lose weight

40+yrs female: *Normal reading*

Googled “COPD” prior to test – very alarmed at thought of being labelled as person with long term condition

Ex smoker – hoping husband will quit.

40yr male: *Abnormal reading*

Smoker for 20yrs. 10 packs per year. “Smoko” at work is seen as a social opportunity. Interested in quitting but hasn't followed this up with GP since testing 8 weeks previously.