

Huff & Puff

– *spirometry screening in our community*



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- ▶ Collaborative Support - Alison Howitt , Tom Epps
- ▶ Executive Sponsor – Lynda Irvine

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.

- Phase 1: Screening of 50 individuals by December 2015
- Phase 2: Sustainable intervention pathway by June 2016

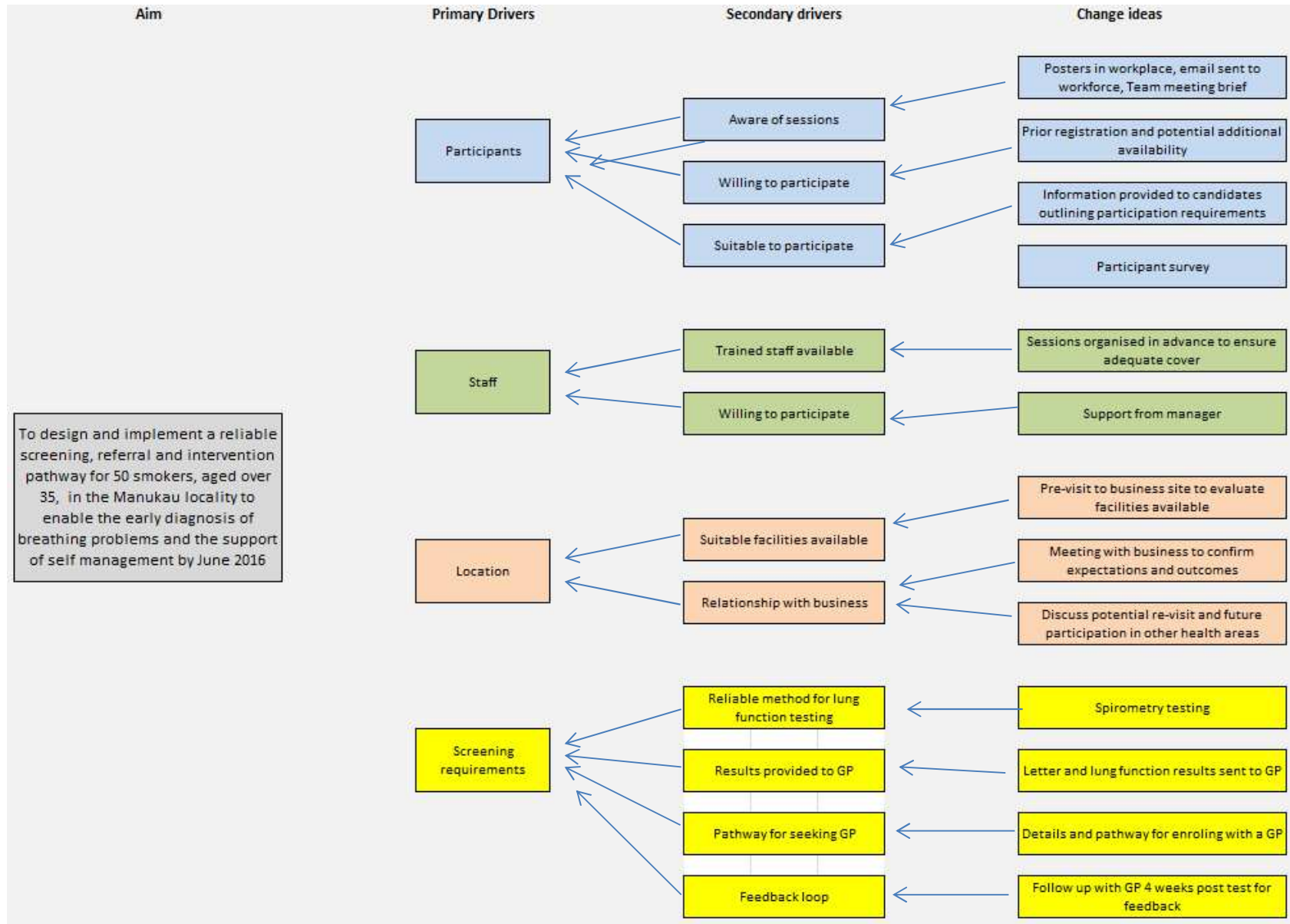
Context

Identifying prevalence of previously undiagnosed lung disease in asymptomatic smokers

Triggering people to think about their lung health and start the process of behaviour change

- Link with primary care team for discussion of early self management

Driver diagram



Dashboard

Outcome measures

Total number of participants screened:

- *26 participants tested for COPD to date across 3 locations (aiming for 50)*

Percentage of participants following up with GP after recording an abnormal spirometry result:

- *20% participants followed up with their GP (1 in 5)*

Process measure

Participation efficiency by pathway (average number of patients seen an hour):

- *Botany Super Clinic = 4.5 participants (hr)*
- *Vodafone NZ (Lambie Drive Call centre) = 4.5 participants (hr)*
- *Manukau Super Clinic = 4 participants (hr)*

Balance measure

Sustainability:

Determination of minimum clinical FTE requirements to undertake Spirometry within the community



Change package

- Finding the right group
- Reliable screening process
- Referral process not robust at this stage
 - smoking advice
 - recommended follow up with GP – no take up
- Intervention process dependent on person going to GP, need to move the person down the change behaviour thing (mind set change)
 - Free GP visit
 - Connect easily with Smoke Free team
 - Other ideas



PDSAs/key learnings

- Doing spirometry on the Quit Bus with the Smoke Free team, does not work. Practically the bus is too small
- People are interested in finding out about their lung health and are willing to come and be tested
- We have a good screening process reliant upon the current multi-skilled team
- Participants are not following up with their GPs and we need to understand why
- Its very hard to measure the effect of screening spirometry on peoples motivation stage

Risks and associated plan of action

- The model is unsustainable in its current form
 - Its highly reliant on the current team
 - Only 1 in 5 participants follow up with GP
- Hard to identify where this initiative fits into the organisation
- Interventions for early or mild COPD will slow down disease trajectory so are worthwhile which spurs us on
- Plan one last PDSA with Smoke Free team

Where to next

- Gain complete data set
 - test 50 participants
 - Determine % abnormal results followed up with GP
- PDSA to test improving participant GP follow up
 - Motivation to change
 - Voice of the patient
- Will a spirometry bus visit at the Smoking cessation team's HOT SPOT - improve the numbers of people accessing quit smoking support?

Highlights



- The team
- The people we tested
- Our spirometry box & stickers
- Support from MSC, Vodafone
- Screening service ready to go – for right application
- Somebody sponsors a BIGGER bus! Or TWO buses