

Health New Lynn

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Organisational “Buy - In”

Aim:

- To ensure all COPD patients are managed using Best Practice Guidelines.
- To understand the current management of COPD by GP’s within the practice.
- To slow the progression of COPD by achieving optimal lung function and improved lifestyle
- To reduce morbidity in patients

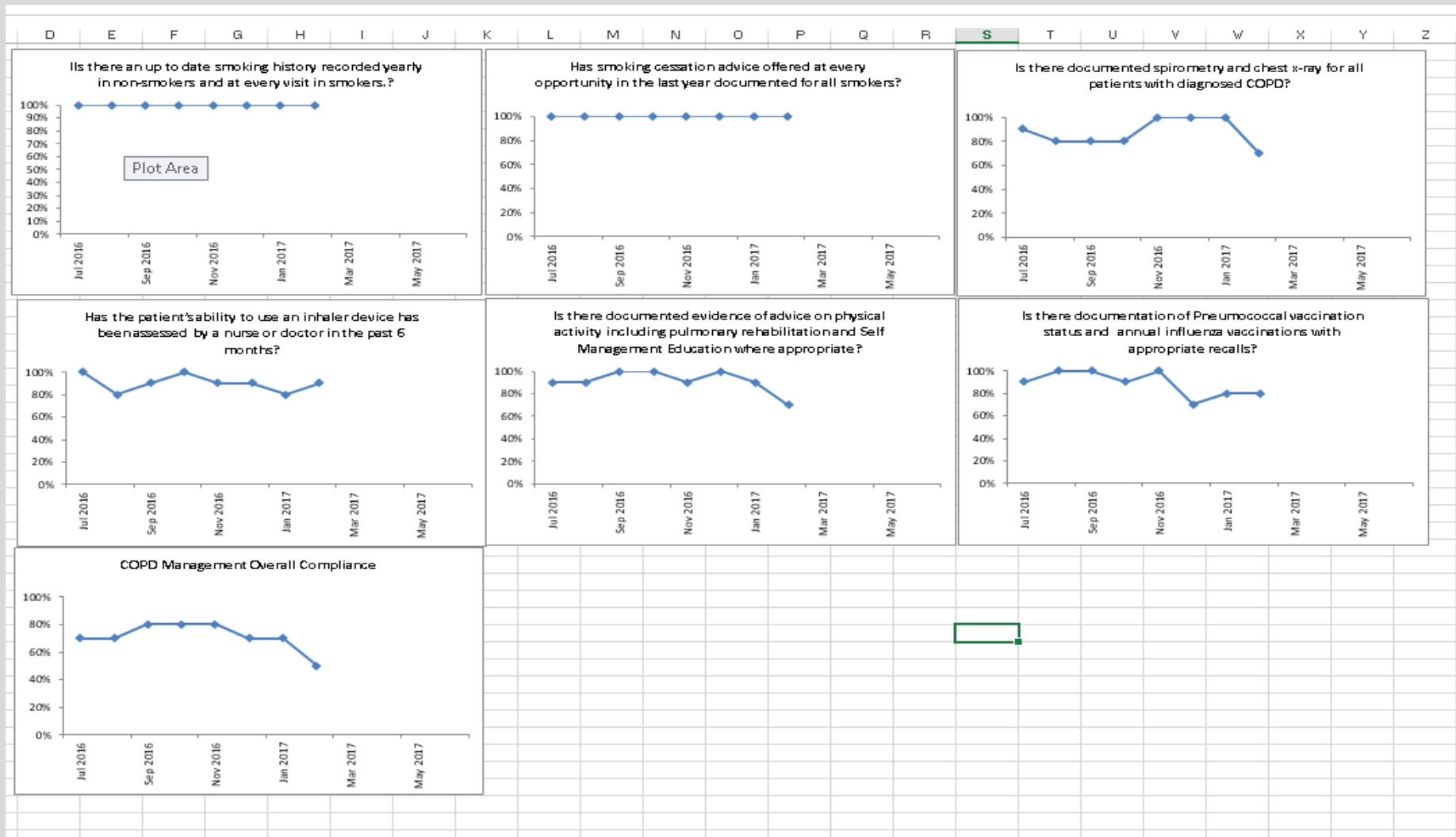
Buy-in

The project has been discussed at GP and Nurse meetings to ensure both teams are aware of the aim and goals. This has been supported by the Clinical Director and Board.

What Process which have been developed

	Process	Outcome
1	COPD Rehabilitation	PDSA cycle –Process for referral and Pathway for staff to follow
2	Internal Spirometry referral policy	Practice policies on how patients are referred to the spirometry clinic

Measures Summary March 2017



Number of Patients

- 375 patients currently identified as having COPD
- 100% have a recorded smoking status
- 50 patients have received spirometry in the practice

Trigger tool completed

- No preventable incidents identified

Patient Story

77 year old male undiagnosed COPD, ex-smoker responded to a text invitation for spirometry.

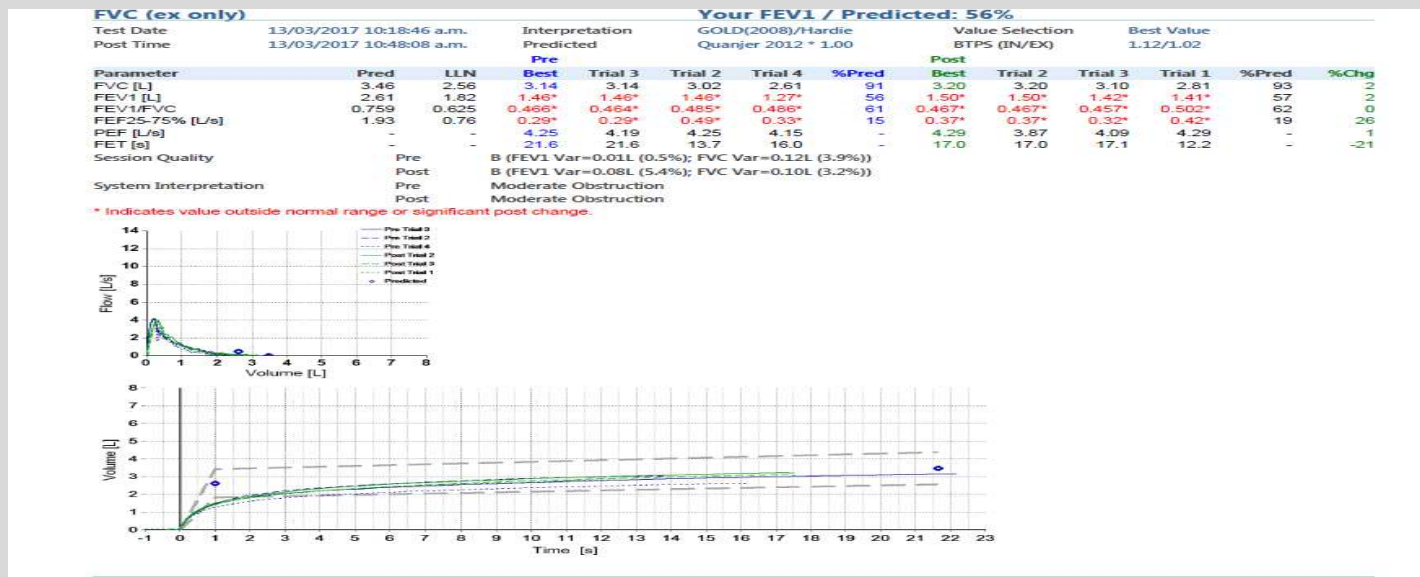
- Symptoms SOB on walking for 10 minutes.

Past History

- high PSA and prostatic enlargement

Spirometry

- Moderate obstruction was identified with 2% change in post- tests.



Assessment

Modified Medical Research Council (MMRC) dyspnoea scale

- Grade 2

Assessment test or CAT test score

- 14

These results gave a B on the Global Initiative for Obstructive lung disease (Gold) grading system

SAMA/LAMAs needs to be used with caution with men who have prostatic enlargement and people at risk of glaucoma