

The aim of the Academic Health Science Network for the North East and North Cumbria (AHSN NENC) Respiratory Programme is to reduce variation in standards of care for COPD. The goal is to reduce the burden of COPD for patients, healthcare professionals (HCPs) and the NHS. This will be achieved through collaborative working with commissioners, providers, industry, academia and patient organisations.

COPD kills around 25,000 people per year in England and Wales and is the 3rd biggest killer disease in the UK. Data from the World Health Organisation (WHO) shows premature mortality from COPD is almost twice as high in the UK as in the rest of Europe.

Programme background

The Outcomes Strategy for COPD and Asthma in England sets out a call to action in the form of REACT to galvanise the collective efforts of the healthcare system, professionals, people with COPD and the public to fundamentally change the burden of COPD. REACT focuses on:

- Respiratory health and good lung health.
- Early accurate diagnosis.
- Active partnership between healthcare professionals and people with COPD.
- Chronic disease management (or control of symptoms).
- Tailored evidence-based treatment for the individual.

Scoping of local needs for the AHSN NENC Regional Respiratory Programme began in January 2015, with prior knowledge and evidence that local management of patients with COPD falls significantly short of the standards recommended by NICE guidance (2010). Extensive consultation across the region confirmed that whilst the needs of individual localities differ slightly, the area of greatest need remains that of improved understanding of COPD and its management both for community-based practitioners and for patients themselves.

The Respiratory Programme aims to encapsulate local needs through the REACT framework.

Priority areas

- Develop and deliver an accredited “Back to Basics” COPD training programme for out of hospital Healthcare Professionals.
- Develop a Regional Respiratory Network, focused in primary care and aiming to share expertise, innovation and best practice.
- Work in collaboration with the British Lung Foundation (BLF) to empower patients and raise expectations of the care they should expect to receive.



Programme overview

- Pilot training courses at Northumbria and Sunderland Universities completed for 60 delegates in total.
- A series of nine e-learning modules were developed in conjunction with Astra Zeneca for HCPs providing education on a range of COPD related topics. They were also suitable for assisting nurses with the professional re-validation process.
- The respiratory programme has worked in conjunction with Newcastle Gateshead, Durham Dales, Easington and Sedgefield and Darlington CCGs to support projects, which may ultimately inform COPD service redesign in primary care.
- The programme supported two small pilot projects with Community Pharmacists working with GPs to improve patient outcomes.
- Collaborating with the BLF to provide Patient Awareness Days, Expert Patient Training Programmes and a Patient Carer Network.
- The first primary care based Respiratory Interest Network meeting was held in September 2015 with subsequent bi-annual meetings.
- Supporting a multi-disciplinary project, which aims to evaluate the effectiveness of shared medical appointments. This style of appointment has worked well in other countries and we are keen to understand if this could be an option for our NHS.
- Explore initiatives to promote referral of appropriate patients for Pulmonary Rehabilitation (PR). The [National COPD Audit Programme](#) found that nationally only 15% of eligible patients were referred for PR. This is mirrored across the North East & North Cumbria, however in some parts of the region the referral rate is as low 4.2% with a completion rate of less than 2%.
- The North East Quality Observatory Service (NEQOS) will support implementation and measurement of improvement as a result of the programme.

Why this work is important for the region

In the North East & North Cumbria COPD presents a significant burden with much room for improvement:

- Prevalence is currently 2.7% compared to 1.6% nationally.
- Premature (under 75 years) mortality rates from COPD are the highest of all English health regions.
- Regional total healthcare spend is significantly higher than the national average.
- Emergency admission rates for COPD have remained constant since 2011/12 despite the establishment of Admissions Avoidance and Exacerbation Management teams across the region.
- The proportion of emergency admissions for COPD that were 0 or 1 day length of stay varies greatly across the region (up to 60% in one area).
- QOF achievement in two of the five indicators (3&4) has decreased steadily over the past four years.

Overview of the AHSN NENC

The AHSN NENC is committed to improving both the health and economic prosperity of the region through innovation and dissemination of best practice. Key aims for the Network are to improve patient care and population health outcomes and to create wealth and stimulate engagement with industry to promote economic growth. The AHSN NENC health improvement programmes have already delivered the following:

- Investment of over £3m into projects designed to disseminate best practice and make a demonstrable impact on health outcomes.
- Established strategic partnerships with organisations including the North East Quality Observatory Service, the Northern England Strategic Clinical Network and Health Education North East for the successful delivery of the Health Improvement Programmes.
- Successful delivery of the Patient Safety Collaborative with close to £500k invested in projects focused on improving patient safety and leading towards transformational change.
- Secured over £800k matched funding for investments from partner organisations.

Contact us

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