

Strategy and implementation documents published to improve outcomes in COPD and Asthma in England

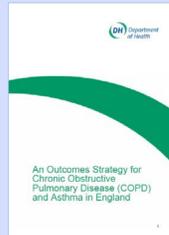
Introduction

Around three million people in the UK are thought to have COPD, although under a million have been diagnosed. In addition, the UK has the highest asthma prevalence in the world at around 10% of the adult population. Variation in care and outcomes for people with COPD and asthma is significant. There is a fourfold variation in hospital admission rates for adults with COPD, and a sixfold variation for those with asthma. Action was required to move from reactionary respiratory services, treating moderate and severe disease, to pro-active services, focussed on prompt and quality-assured diagnosis and disease management.

Methods

A systematic evidence review was undertaken with the engagement of a range of healthcare professionals from primary and secondary care. Following wide consultation with professional, industry and patient group stakeholders, consensus was reached on a national strategy to improve outcomes for people with COPD and asthma

Results



An Outcomes Strategy for COPD and Asthma in England was published in July 2011. Figure 1 shows the six high-level objectives that were set out in the Outcomes Strategy. These objectives are shared by public health services, the National Health Service (NHS) in England and social care services.

Figure 1

Objective 1: To improve the respiratory health and well-being of all communities and minimise inequalities between communities.

Objective 2: To reduce the number of people who develop COPD by ensuring they are aware of the importance of good lung health and well-being, with risk factors understood, avoided or minimised, and proactively address health inequalities.

Objective 3: To reduce the number of people with COPD who die prematurely through a proactive approach to early identification, diagnosis and intervention, and proactive care and management at all stages of the disease, with a particular focus on the disadvantaged groups and areas with high prevalence.

Objective 4: To enhance quality of life for people with COPD, across all social groups, with a positive, enabling, experience of care and support right through to the end of life.

Objective 5: To ensure that people with COPD, across all social groups, receive safe and effective care, which minimises progression, enhances recovery and promotes independence.

Objective 6: To ensure that people with asthma, across all social groups, are free of symptoms because of prompt and accurate diagnosis, shared decision making regarding treatment, and on-going support as they self manage their own condition, and to reduce need for unscheduled health care and risk of death.

An NHS Companion Document was developed to sit alongside the Outcomes Strategy and detail how the NHS in England specifically can take action to meet the six high-level objectives. Table 1 shows the COPD & asthma actions from the NHS Companion Document, which were set out according to the five domains of the overarching NHS Outcomes Framework in England.

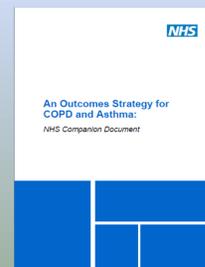


Table 1

NHS Outcomes Framework	Domain 1: Preventing people from dying prematurely	Domain 2: Enhancing the quality of life for people with long-term conditions	Domain 3: Helping people to recover from episodes of ill health or following injury	Domain 4: Ensuring that people have a positive experience of care	Domain 5: Treating and caring for people in a safe environment
COPD-specific actions	Diagnose earlier and accurately Prevent progression Prolong survival	Risk stratify and understand the local population Support self-management and shared decision-making Provide and optimise pharmacological and non-pharmacological treatment	Provide the right care in the place at the right time Ensure structured hospital admission Support post-discharge	Empower through information Assess psychosocial support and social care needs Assess palliative care needs	Deliver high flow emergency oxygen safely Prescribe steroids according to evidence-based guidance Robustly risk manage home oxygen environments
Asthma-specific actions	Prompt, accurate, quality assured-diagnosis Aim for freedom from symptoms once diagnosed	Structured, on-going management of asthma, using a shared decision making approach, to achieve control of asthma	Prompt action to avoid or manage asthma exacerbations	Shared decision-making between professionals and person with asthma	Optimal treatment based on a stepwise approach to prescribing.

A baseline data set of indicators for measuring and monitoring outcomes for improvements in respiratory care was established, and benchmarking data has been produced, to assess variation in the models of service provision across England. The data set is responsive to change at all levels of the provider system, from local to national, and helps to identify areas and particular aspects of care for local action. Forty clinical respiratory leads were also appointed across England to drive implementation of the Strategy.

Conclusion

Through the Outcomes Strategy for COPD and Asthma in England, the NHS Companion Document and regional clinical leadership, care and outcomes for COPD and asthma are improving, through a shift in the burden of the diseases to earlier, prompt and accurate diagnosis and proactive management.