

Reducing asthma hospital admissions across NHS Bristol

A Joint Working case study between NHS Bristol and Teva UK Limited

Project rationale

NHS Bristol identified there were 79,794 emergency hospital admissions for asthma in the UK in 2008-09 with an estimated 75% being avoidable.¹ During that time, around 600 people were admitted to hospital as a result of their asthma, with four deaths in Bristol alone.

NHS Bristol wanted to improve asthma management to reduce asthma hospital admissions.

Local challenge

Previous audits had identified:

- Variations in asthma management across GP practices with some practices providing annual asthma reviews to 73.3% of their asthma register, and others only 36.4%;
- Variation in admissions of between 0.2% and 6.9% of the asthma register;
- On average, only 20.8% of asthma patients have been provided with an asthma self-management plan (SMP). If patients were better informed on how to manage their asthma symptoms, it is likely that many of these admissions could have been prevented;
- Exception reporting data for Quality and Outcomes Framework Asthma highlighted that as much as 38.3% of asthmatics in some practices were being exception reported rather than reviewed.

Agreed objectives

The objectives for the project were aligned to QIPP:

Patient

- Optimise respiratory health and Quality-of-Life for asthma patients
- Increase patient knowledge and confidence in selfmanaging their asthma

NHS Bristol

- Reduce (prevent) emergency hospital admissions attributed to asthma
- Improve practice staff knowledge around productive asthma management
- Develop a high quality, patient centred approach to asthma care

Teva UK Limited

- Appropriate use of respiratory medicines, including Teva medicines, in line with BTS/ SIGN guidelines
- Demonstrate the value of Joint Working with Teva UK Limited

Approach defined

NHS Bristol focused on areas of high deprivation, high asthma hospital admissions and higher exception reporting for asthma

Teva UK Limited provided a high-quality, patient-centered service (IMPACT) including therapeutic review, modular education and detailed clinical review by dedicated asthma diploma trained NSHI nurses

Any changes authorised by GP were implemented by NSHI nurses according to agreed practice protocol²⁻⁶

A patient questionnaire evaluated patient feedback of the service

Practice staff were provided with modular respiratory training, mentorship in a clinical setting and supported in reviewing their asthma register

Resource split

NHS Bristol

- Access to audit data
- Access to practices
- Engagement with GP
- Dedicated project manager in Medicines Management Department, NHS Bristol

Teva UK Limited

- The IMPACT service (Improving the Management of Patients Asthma and COPD), an independent nurse service sponsored by Teva UK Limited and delivered by National Services for Health Improvement (NSHI)
- Dedicated project manager
- 🛥 Asthma educational material



Outcomes achieved

Reduction in hospital admissions

There was a **19.46% reduction in asthma admissions** in 2011/12 in Bristol (n=56) compared to the previous year. Practices participating in the IMPACT programme accounted for 54.7% of this (n=13).



Asthma non-elective admissions (Feb 2010 - Feb 2011 vs. Feb 2011 - Feb 2012)

Positive patient reported outcomes

Results from the IMPACT service patient evaluation showed that patients felt more confident in managing their asthma and that they were using their inhalers correctly following a structured asthma review.

Question ('Strongly agree' or 'Agree')

I would recommend this asthma review to others I will attend a yearly asthma review at my surgery	96% 95%
I am very satisfied with the asthma review I received	98%
I am more confident in managing my asthma	93%
I know what to do if my asthma gets worse	97%
I now feel confident that I can use my inhalers correctly	95%
I now know more about my asthma	85%
During the review I was allowed to say everything that I thought was important	99%
The asthma review was useful	95%

In alignment with QIPP, NHS Bristol succeeded in improving asthma management to reduce (prevent) asthma hospital admissions. Benefits included:

To the patient

- A structured approach to asthma management and increased knowledge and confidence of patients in managing their asthma
- The programme identified 92 patients that were eligible to have their asthma therapy stepped down, ensuring that patients were prescribed the lowest dose of treatment necessary for control of their symptoms (following BTS/ SIGN Asthma Guidance)
- The programme endeavoured to identify that patients were on the most appropriate asthma medication

To NHS Bristol

- A multidisciplinary team approach to asthma management that enhances patient outcomes and reduces non-elective asthma hospital admissions
- Practice nurses increased their asthma knowledge through the delivery of education modules
- Greater reduction in hospital admissions in practices that have run the IMPACT asthma programme compared to practices that have not
- More appropriate use of medicines (waste management)⁷ in line with national and local asthma guidelines²

To Teva UK Limited

- Improved relationship between Teva UK Limited and NHS Bristol
- Significant learns about effective collaborative working and the underlying issues regarding asthma control

"We have been working jointly with Teva to improve asthma management in Bristol for nearly two years. Their organisational and networking skills have enabled us to achieve our strategic objectives much sooner than if we had worked alone. As a result of our Joint Working, we have increased both patient and clinician knowledge in asthma management and have observed an ongoing reduction in our asthma hospital admissions."

Long-Term Conditions Liaison Manager, NHS Bristol

Other NHS organisations have expressed an interest in the success of this project and discussions have taken place regarding replication and implementation between interested parties.

Joint Working between Teva UK Limited and the NHS must be for the benefit of patients or the NHS and preserve patient care.⁸

References

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