

**Lumos Practice Booster: COPD**

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| **About you** |

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| Demand | Wanting to build a new service or enhance current services |
| Age cohorts | 25-44 |

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| **Explore** |
| * Identify patients with COPD without smoking status records, via your practice extraction tool (PENCS, Polar, other) to identify all patients who could benefit from your services and better target them.
* Your practice may serve patients who display common COPD risk factors. These patients may benefit from smoking and lifestyle education and coaching, but also consider performing a periodical spirometry with them.
	+ When **performing or wanting to start performing spirometry**, you may consider:
		- Upskilling more members of your practice team (e.g., nurses) so to potentially free up your GPs' time
		- Initiate proactive screening activities whereby at-risk patients are referred, for example, to your practice nurse to receive a spirometry
		- Use spirometry not only for diagnostic purposes, but also for monitoring purposes
* Your practice serves a large 25-44 cohort.
	+ Is the service appropriate for this age group? For example: the **hours of operation** of the service may need to consider that this age cohort may be employed and as such be able to access services outside working hours, over the weekend or via telehealth.
	+ Are you promoting the service through the right channels?**Digital channels** may be more appropriate and palatable for this group; consider offering **online appointments** via your website, a third-party website, or an app.
* If your COPD patients appear to be more acute, they may require more interactions with your practice or other services.

If your COPD patients appear to have less interactions with your practice (see GP visits) but are more acute than the ones in other practices (based on the hospitalisation data), they may be an opportunity to interact more with these patients.Alternatively your COPD patients may appear to have many interactions with your practice (see GP visits), and potentially be more/less acute than the ones in other practices (based on the hospitalisation data)Explore **recall systems, telehealth-based follow ups**, **disease management resources or education delivered through digital channels** (given the age cohorts you are serving).These opportunities may help you support these patients while also helping you manage patient flow into your clinic.* Investigate the Lumos data and ascertain the reason for admission to hospital and ED, but also use your practice data extraction tool to identify patients with additional **co-morbidities**.These patients may benefit from additional support. You may consider:
	+ Upskill and involve the wider practice team (nurses, admin staff, etc.) in identifying patients for post **hospital discharge follow up**.
	+ Investigate the data to understand **how long after discharge these patients seem to be visiting your practice** (similar to page 18 of your practice report) and make an informed decision on the need for more proactive follow up.
	+ Initiate a **multidisciplinary management plan** (e.g., shared care plan)

Would any COPD patient benefit from a **mental health plan** or other coping advice and could they be referred to an on-site or external psychologist experienced in managing anxiety in respiratory patients?* + **Refer to other support services** (e.g., hydrotherapy, exercise physiologist, etc.)
* Patients presenting to ED under a cat 4-5, for example, may not be aware they could access your services or your opening hours, hence you may need to communicate with them via the relevant channels (as covered above).
* Investigate the data further and understand if there are other underlying reasons for ED presentations; patients may find the ED more accessible, i.e., it is closer to their home, it is free, it is open afterhours, etc.
* Explore opportunities for you to **offer part of the services offered by outpatient services** (e.g., education components, medication management, exercise, etc.) and divert patients into your practice, if interested and have capacity.

If you have capacity, you may explore delivering some of these services in your practice setting, e.g., group education classes on self-management techniques.If unable to offer these services, you may seek assistance from your PHN to identify **useful referral pathways** to support you in the care of your patients.* Initiate follow ups post **pulmonary rehab**, if your patients access these services.If they do not, you may consider if referral to pulmonary rehab services is appropriate.
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| **Patient characteristics** | Refer to page 6 of your report |
| Gender | E.g., female patients may wish to access a service offered by a female GP/nurse |
| Cultural background | Consider if your services need to be promoted in **different languages**, need to **consider specific social norms** (community leaders, religious leaders, etc.) or offer different options (e.g., service is offered by **female GP/nurse**) |
| Socioeconomic status | E.g., if patients are from a low socio-economic background, they may wish to access **bulk-billed services** |
| Remoteness | **Remoteness**may hinder a patient's ability to access your services. There may be opportunity to refer patients to services in their community or arrange transportation services |

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| **Consider** |

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| **Implement** |
| * Access tools from your PHN to help you start on a project: [*https://www.nbmphn.com.au/Health-Professionals/Services/COPD*](https://www.nbmphn.com.au/Health-Professionals/Services/COPD)
* Contact your General Practice Support Officer: 02 4708 8100
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**Useful links**

1. [*https://www.nps.org.au/news/the-value-of-spirometry-in-clinical-practice*](https://www.nps.org.au/news/the-value-of-spirometry-in-clinical-practice)
2. [*http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-RespiratoryFunctionTests*](http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Factsheet-RespiratoryFunctionTests)
3. [*https://copdx.org.au/copd-x-plan/key-recommendations-of-the-copd-x-guidelines/*](https://copdx.org.au/copd-x-plan/key-recommendations-of-the-copd-x-guidelines/)
4. [*https://lungfoundation.com.au/resources/?condition=9&user\_category=31*](https://lungfoundation.com.au/resources/?condition=9&user_category=31)
5. [*https://pubmed.ncbi.nlm.nih.gov/25478202/*](https://pubmed.ncbi.nlm.nih.gov/25478202/)
6. [*https://www.racgp.org.au/clinical-resources/clinical-guidelines/handi/conditions/musculoskeletal/pulmonary-rehabilitation-for-copd*](https://www.racgp.org.au/clinical-resources/clinical-guidelines/handi/conditions/musculoskeletal/pulmonary-rehabilitation-for-copd)
7. [*https://www.sjog.org.au/our-locations/hawkesbury-district-health-service/news/news/2018/11/15/03/20/new-pulmonary-rehabilitation-service-in-the-hawkesbury*](https://www.sjog.org.au/our-locations/hawkesbury-district-health-service/news/news/2018/11/15/03/20/new-pulmonary-rehabilitation-service-in-the-hawkesbury)
8. [*https://lungfoundation.com.au/health-professionals/clinical-information/pulmonary-rehabilitation/lungs-in-action/*](https://lungfoundation.com.au/health-professionals/clinical-information/pulmonary-rehabilitation/lungs-in-action/)
9. [*https://www.nbmphn.com.au/Health-Professionals/Services/COPD/COPD-Collaborative*](https://www.nbmphn.com.au/Health-Professionals/Services/COPD/COPD-Collaborative)
10. [*https://www.nbmlhd.health.nsw.gov.au/ArticleDocuments/619/GP\_INtegrated\_COPD\_Respiratory\_Service\_InfoSheet.pdf*](https://www.nbmlhd.health.nsw.gov.au/ArticleDocuments/619/GP_INtegrated_COPD_Respiratory_Service_InfoSheet.pdf)
11. [*http://www.catestonline.org/*](http://www.catestonline.org/)
12. [*http://goldcopd.org/wp-content/uploads/2016/12/wms-GOLD-2017-Pocket-Guide.pdf*](http://goldcopd.org/wp-content/uploads/2016/12/wms-GOLD-2017-Pocket-Guide.pdf)
13. [*https://www.racgp.org.au/clinical-resources/clinical-guidelines/key-racgp-guidelines/view-all-racgp-guidelines/supporting-smoking-cessation*](https://www.racgp.org.au/clinical-resources/clinical-guidelines/key-racgp-guidelines/view-all-racgp-guidelines/supporting-smoking-cessation)

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