

Background

We felt our patients were underdiagnosed for COPD, and that we needed to improve education/management for COPD patients. Using best practice guidelines we began to develop a Lung Health Program. Being a small FHT, resources were scarce and the impact of a sustainable program was large. A one small step at a time approach was initiated involving care providers and clinical support staff. Level 1, Level 2 screening and STOP for FHT are integrated into our program. We are moving towards an integrated teaching/management program (action plans including prescriptions).

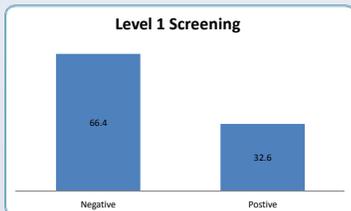
Goal

Our goals are identification, education and management of COPD patients

Example of Measures

Level 1 Screen (Canadian Lung Health Test)

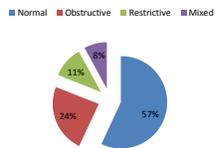
90% of patients 40+ smoker/ex-smoker screened to date- 2232 patients
728 positive screens representing 32.6% of Level 1 screens



Level 2 Screen (Spirometry)

369 patients have received in-house spirometry

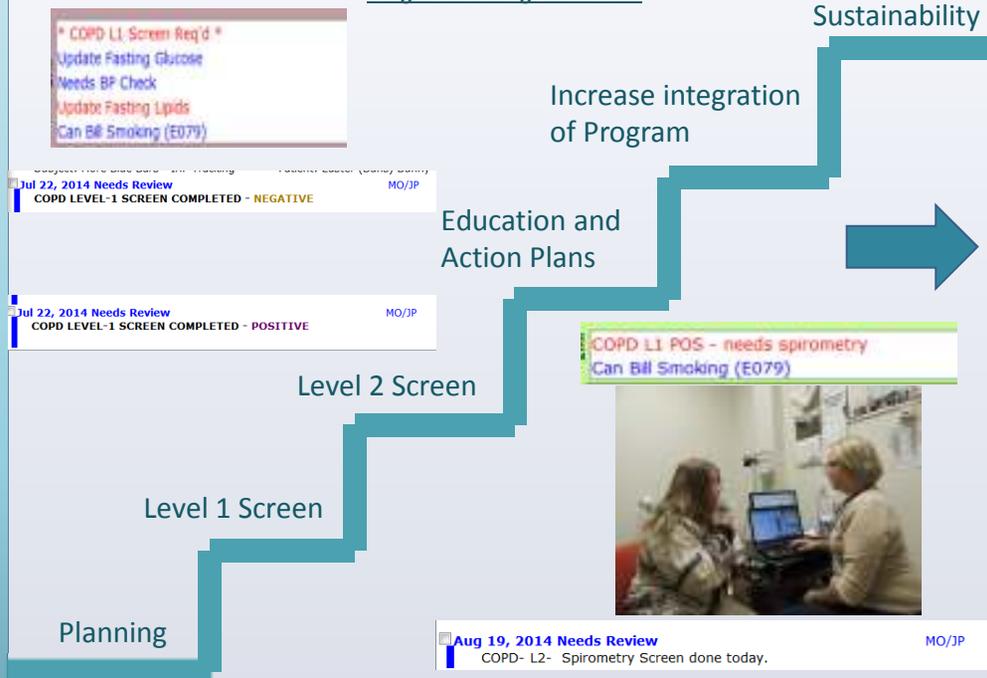
Level 2 Spirometry Screening Results



Quality Improvement

We have set a QIP goal of 95% of eligible patients Level 1 screened. The Canadian Lung Health Test can be initiated by support staff (Ushers, POETS, MOAs etc) as well as IHP and primary care providers. Within programming time, we are now regularly scheduling in-house spirometry. As part of the program we have a NP who is the clinical expert on spirometry and COPD management. Primary care practitioners have the option of referring patients to this NP. This NP also leads our STOP for FHT program with a second NP also trained. Recently we have also trained an RN to do spirometry which frees up our NP to take on more patients for education and management.

Lung Health Program - COPD



Aug 19, 2014 Needs Review
COVD- L2- Spirometry Screen done today. MO/JP

Canadian Lung Health Test (Level 1 Screen) and Spirometry

The Canadian Lung Health Test

The signs of COPD are not always noticeable in the early stages. In fact, many people blame a cough or a decline in fitness on aging or a smoker's cough.

If you are over 40 and currently smoke cigarettes, or have smoked in the past, you may be at risk for developing COPD.

Please answer yes or no to the following questions so that we may better provide for your health care.

1. Do you cough regularly?	Yes
No	
2. Do you cough up phlegm regularly?	Yes No
3. Do even simple chores make you short of breath?	Yes
No	
4. Do you wheeze when you exert yourself, or at night?	Yes
No	
5. Do you get frequent colds that persist longer than those of other people you know?	Yes
No	

The Lung Association (September, 2012)

Smokers and former smokers are at risk of developing COPD. COPD is short for "Chronic Obstructive Pulmonary Disease and it's the new name for emphysema and chronic bronchitis. Some non-smokers can also get COPD.

If you are over 40 and smoke or used to smoke, you may already have COPD. Take this quick test to screen for symptoms of COPD.

Spirometry is a common and effective diagnostic test that can easily be done in your doctor's office or at a nearby hospital or clinic. You will be asked to blow, as long and hard as you can, into a small tube attached to a machine. The machine measures how long it takes to blow out all the air from your lungs. The more blocked your airways, the longer it takes to blow the air out. Spirometry is the most reliable way to test your lungs for COPD.

If all questions are answered with a No then the screen is negative. It just takes one Yes to be positive. The appropriate result is charted using a preset searchable stamp.

Empowering the Patient



References

The Lung Association. (2014). Canadian lung health test. Retrieved July 18, 2014 from http://www.lung.ca/diseases-maladies/copd-mpoc/signs-signes/COPDQuiz-MPOCQuiz_e.php
Canadian Thoracic Society. (2013). Updated CTS COPD action plan. Canadian Respiratory Guidelines. Retrieved August 7, 2014 from <http://www.respiratoryguidelines.ca/updated-cts-copd-action-plan>

Contacts

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