

Abstract Title: Cwm Taf University Health Board (CTUHB) and GSK working jointly to educate Healthcare Professionals (HCPs) to teach adult patients with asthma/and or COPD about effective, sustainable inhaler techniques.

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Context: The 'Isle of Wight Respiratory Inhaler Project' shared by National Institute for Health and Care Excellence (NICE) as an example of implementing NICE guidance identified poor inhaler technique as an element of poor local performance. The report demonstrated a reduction in the use of reliever/rescue therapy, prescription of selective beta agonists, hospital admissions and deaths after intervening to improve inhalation techniques. The programme undertaken in the Isle of Wight informed the approach for the Cwm Taf Inhaler Training Project¹.

Outline of the problem: In 2012, the Cwm Taf University Health Board (CTUHB) spent £9.6m on inhaled respiratory medicines, representing 16% of the overall medicines budget². In 2011, in the region covered by the CTUHB, the prevalence of asthma was 6.2% with 2.6% for COPD³. Asthma hospital admissions were lower than the Welsh average⁴; COPD hospital admissions were higher⁵.

Assessment of the problem/ analysis of its causes: It is recognised that poor inhaler technique leads to poor compliance, unnecessarily higher doses of medications being used, increased use of rescue medication and ultimately to worsened patient outcomes¹.

Strategy for change: This joint working project focussed on providing education to HCPs to enable them to provide consistent and efficient inhaler technique to patients to allow more effective use. To facilitate and encourage closer working between primary, secondary and community care for the benefit of patients with asthma/COPD.

Measurements of improvement: Over the period September 2012 to June 2014, 20 inhaler technique training events were delivered to a total of 261 HCPs⁶.

Effects of changes:

- 97 organisations/teams/departments currently have at least one HCP who has completed this training⁶.
- Over 90% of trainees who completed the evaluation forms ranked the overall training, presentations and workshops as good/excellent⁶ (n=42).
- HCPs were able to build relationships across disciplines including nursing, medical, pharmacy and develop closer working arrangements across organisations (including hospitals, general practice, community pharmacy, community nursing) through the activities they attended⁶.
- All HCPs considered the training to be valuable or extremely valuable⁶(n=64).
- 83% of HCPs felt their knowledge of assessing patient inhaler technique had increased⁶(n=64).

In parallel, SABA use was 11% lower in 2013/14 compared with that in 2011/12⁷. A 13% reduction in hospital COPD admissions and a 10% reduction in hospital Asthma admissions was observed for 2013/2014 compared with 2011/2012⁶. (*Hospital admission data constitute a very complex metric influenced by multiple confounding variables and no causal relationship is inferred. Any interpretation of these data should be treated with caution and acknowledging these caveats*).

Lessons learnt: A multidisciplinary approach facilitated shared learning and increased understanding of the importance of inhaler technique training for patients. It also enabled patients to choose their preferred place for training.

Message for others: Joint Working arrangements between healthcare organisations and the pharmaceutical industry can lead to healthcare benefits for patients. Inhaler technique training for HCPs can lead to improved use of medicines. A communication plan is essential to remind HCPs to prioritise inhaler technique training in Asthma and/or COPD patients where appropriate.

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References

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