

# A COLLABORATIVE SCREENING, REFERRAL AND MANAGEMENT PROCESS TO IMPROVE HEALTH OUTCOMES IN CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)

**Researchers:** Ms Heather Allan, Ms Simone Diamandis, Dr Bandana Saini, Mr David Marshall, Dr Guy Gavagna, Dr Geraldine Peterson-Clark

## Key Findings (max. 1 page):

### Pharmacist recruitment and patient screening

- 14 pharmacists and 1 pharmacy nurse participated in screening program
- 112 patients had their lung function screened in the pharmacy using the Piko-6
  - 41% of those screened fell in the medium (yellow) or high risk (red) zone of the Piko-6
  - 72% had a smoking history (21.43% current smokers and 2.7% were using NRT)
  - 37% did not have current influenza vaccination; 38% did not have a current pneumococcal vaccination

### Referral and management

Of the 112 patients screened:

- 56 (50%) were referred on to their GP for assessment and diagnosis
  - 46 patients fell in the medium (yellow) or high risk (red) zones of the Piko-6
  - 10 patients fell in the low (green) zone but reported at least one respiratory symptom
- Of 56 patients referred to their GP, 20 GP reports were completed and returned to the pharmacist. 36 reports were not returned and thus lost to follow up. Returned reports showed:
  - 4 cases of COPD had been diagnosed
  - 4 cases of other respiratory disease had been diagnosed
  - 2 cases of other conditions had been diagnosed
  - 13 spirometry tests had been conducted
  - 4 pneumovax had been given
  - 5 smoking cessation interventions
- All 56 referred patients were invited for two follow-up visits with the pharmacist
  - 52 (92.8%) patients came for first follow-up visit (Visit 2) at which the pharmacist initiated:
    - Smoking cessation advice (18%); Medication counselling (17%)
    - Vaccine counselling (for fluvax 28%; pneumovax 21%)
  - 32 (57.1%) patients came for the second follow-up visit (Visit 3) with the pharmacist
- In GP reports, GPs made the following recommendations for pharmacist follow-up:
  - Smoking cessation advice (25%)
  - Medication counselling (35%); Device use (4%); Vaccination counselling (5%)

### Feedback

- Feedback demonstrates a high level of satisfaction with the program from the pharmacists, patients and general practice.
- Limited feedback was received from general practitioners

### GP Engagement

- Despite efforts by the project team, affected GPs were not fully engaged in the program. This is reflected in the low return of GP Reports.

### Conclusion

Lung function screening in community pharmacy has been shown to be feasible and has been shown to have a positive impact on early intervention for at-risk patients; the pharmacist/patient relationship; and pharmacist awareness of COPD. To increase GP engagement and the impact of collaboration, the researchers recommend earlier, targeted and tailored communication, training and remuneration be provided at general practice level, including practice managers.

## KEY FINDINGS