

# Finding the missing millions with COPD



## A NOVEL APPROACH GENERATES NEW IDEAS

### DIVERSE GROUP OF EXPERTS DEVELOP NEW IDEAS

The day brought together experts from the health sector (AHSC, Doctors, Pharmacists and AHPs), corporate sector (advertising, innovation specialists and marketeers), health technology entrepreneurs and pharmaceutical partners.

### A DIFFERENT TYPE OF AGENDA

A facilitated day which did not follow the traditional agenda. Participants were taken through a creative process that challenged assumptions about people with COPD or suspected COPD, paralleled the missing millions to a lost dog in London being searched for by characters such as Batman. This led to the generation of many ideas that were prioritised so that they could be worked up into high level implementation plans.

*"I have attended a lot of workshops and this has to have been one of the most interesting in membership and style of meeting"* participant feedback

The Full Report is available upon request  
robynhudson@hiec.org.uk

On the 19th November 2010 the Health Innovation Education Cluster (HIEC) for North East London, North Central London & Essex (NECLES) together with Novartis hosted a creativity event to generate ideas to find the missing millions with Chronic Obstructive Pulmonary Disease (COPD).

COPD affects approximately 800,000 people in England alone and a further 2 million people are thought to be undiagnosed. COPD patients use 1 million bed days per year and in London they account for 6.5% of all hospital emergency admissions. It is expected that if people with COPD were to be identified early it would be possible to improve the effectiveness of disease management through improved self management and timely intervention in the form of medication and pulmonary rehabilitation. By improving outcomes for individuals the system will benefit in terms of a reduction in unscheduled care and delivering care closer to the patient.

The day brought together experts from the health sector, corporate sector, health technology entrepreneurs and pharmaceutical partners. The facilitated workshop took participants on a creative journey with particular emphasis on those who have respiratory symptoms but are unaware and are not currently engaged in the Health System. Those for which self management and early interventions would help improve their quality of life and deliver value back to the system.

### Ideas & Innovations

The ideas generated fall into 3 principle clusters; partnership opportunities, Government influence required, & within the immediate reach of the NECLES HIEC. Figure 1 summarises the ideas and indicates relative priority based on impact.

Partnerships between supermarkets and pharmacy's were thought to be opportunities for high impact screening. In 2011 a major supermarket chain is planning on hosting GP practices, coupled with their sophisticated customer loyalty schemes and cigarette retail business there is a great synergy to be explored around spirometry and other diagnostic tests being delivered where the people are. The HIEC would be well placed as a joint partner in this endeavour.

Government support was considered essential in a number of innovative ideas. For instance cigarette pack interventions (reducing the number of cigarettes/pack, inserting cards with essential quit smoking information) and licensing individuals to smoke contingent on spirometry were just a few. In addition the joining up of all prevention programs (CVD, Cancer & Respiratory) could be advantageous as this reflects the patients need for a single point of care rather than a service siloed along medical specialties. A further powerful idea was to consider placing the incentive not within the health system (QOF & CQUIN) but for the patient in the form of "health points or vouchers" that promote positive health behaviour and deliver individual benefit (eg Tesco Club cards)

It was also clear that there were many unexploited social marketing ideas; a cough soundtrack in the cinema to encourage those with a chronic cough to attend their GP for a check up, signs at the top of public staircases indicating that those with shortness of breath should have a review and possibly health promotion information could be placed on every day items such as beer mats or even cough medication.

The NECLES HIEC together with partners intends on developing one of the identified areas during 2011.

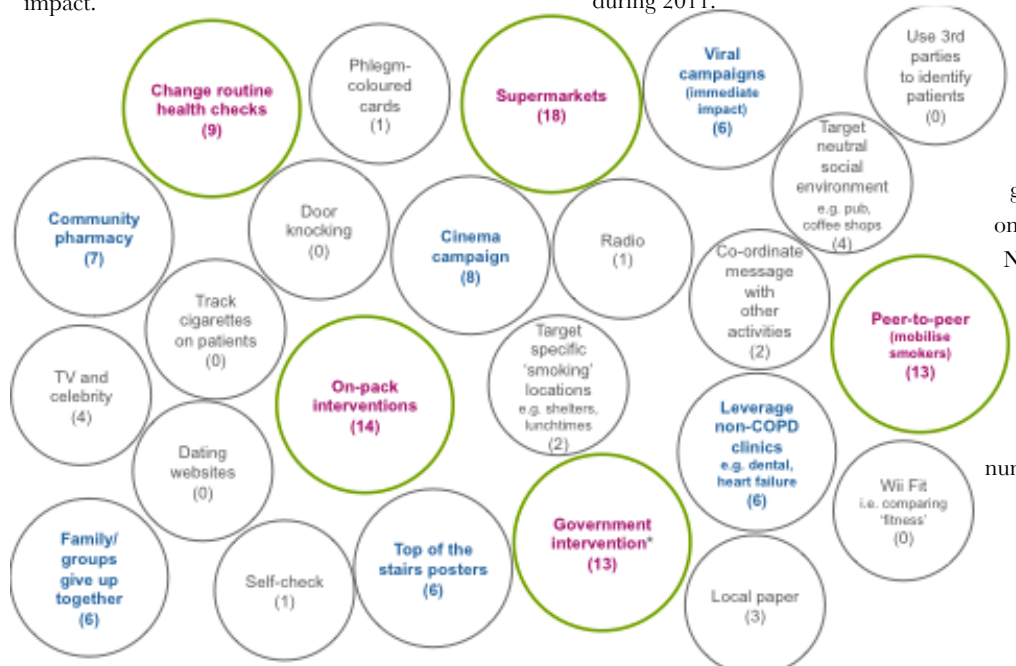


Figure 1: Ideas generated on the 19th November 2010, numbers indicate priority (high numbers are high priority)



## NECLES HIEC

The North East London, North Central London and Essex (NECLES) Health Innovation Education Cluster (HIEC) is a dynamic network of Health Educators, Innovators and those that ensure health care is delivered to the local population to the best possible standard in hospitals, in the community and at home.

Our aim is to transform the health of the public in our region; changing areas of social disadvantage and poor health outcomes, to ones of excellence.

We will help identify and evaluate new models of delivering care closer to home, empowering people to manage their own health. We will coordinate and disseminate best practice across the HIEC region through multi-professional networks, reducing duplication and eliminating inefficiency.

Barts and the London School of Medicine and Dentistry, QMUL, UCL Partners and the Post graduate Medical Institute at Anglia Ruskin University are the principle partners in the NECLES HIEC.

## Long Term Conditions: COPD workstream

The COPD team is working on a number of other programs together with the health service, health educators and corporate partners. The principle aims are to reduce unscheduled care, improve self management by patients and to ensure that patients always have access to the best possible health care.

The following are just some of the work that is ongoing with the NECLES HIEC:

1. Multisite coordination of Lung Improvement projects across the NECLES HIEC region: Establishing a door to decision to mask time (Non Invasive Ventilation) for acidotic COPD patients. (Sites Barts & The London, Basildon & Thurrock, Colchester, Homerton, Mid Essex, Southend & Whipps Cross Hospital), Feasibility of removal of Short Burst Oxygen. Royal Free Hospital & NHS Waltham Forest, Use of self management & rescue packs to reduce admission (Sites Barts & The London, Homerton NHS Trust, Whipps Cross & Basildon & Thurrock Hospitals), Validating GP registers to NICE 2010 Standards (Sites 10 GP's in NHS Waltham Forest)

2. Demonstrating Value in Long Term Conditions in collaboration with UCL Partners, and Outer North East London. We aim to show that it is possible to improve care in line with NICE guidelines (July 2010) through innovative use of data and support to bridge the gap while lowering cost.

3. Creation of a Patient Reported Experience Measure based on qualitative and extensive interview process examining all elements of the patients interaction with the health system.

By April 2012 the NECLES HIEC will hope to have improved outcomes for the population of patients with COPD and contributed to the diffusion and uptake of innovative ideas.

## HIEC COPD TEAM

**Professor Mike Roberts**  
HIEC Facilitator

**Kirsty Barnes**  
HIEC Fellow

**Robyn Hudson**  
Managing Director

The NECLES HIEC has 3 themes and within each of these 2 work streams:

Long Term Conditions: COPD and Asthma in Children and Young People

Acute: Maternity and Eyes and vision

Prevention: Cardiovascular Disease and Improving Migrant Health

**For Further information**  
[robynhudson@hiec.org.uk](mailto:robynhudson@hiec.org.uk)

[www.necles.org.uk](http://www.necles.org.uk)