

Respiratory educators in general practice

Providing team-based patient care



What?

Inviting respiratory educators in to general practice allows patients to access specialist care in the convenient and familiar surroundings of their usual medical provider.

Patient outcomes are improved when visiting clinicians work collaboratively, side-by-side with GPs and practice nurses. A 'train-the-trainer' approach allows respiratory educators to share their knowledge and expertise with general practice staff who can then provide enhanced ongoing care for their patients.

This team-based approach aligns with the principles of the Patient Centred Medical Home (PCMH) model of care, and is rapidly evolving to become the future of primary healthcare in Australia and internationally. In a general practice operating as a PCMH, different health care practitioners work together to provide comprehensive and integrated care for their patients.

Why?

Chronic respiratory conditions are a major cause of potentially preventable hospitalisations in South Eastern NSW. The Shoalhaven local government area is ranked in the top 100 areas in Australia for asthma prevalence and in the top 30 for chronic obstructive pulmonary disease (COPD) prevalence.

Asthma and COPD educators are clinical experts trained to educate and empower patients to take a proactive role in their health. In the Shoalhaven, there is only one asthma and one COPD educator to cater to almost 13,500 patients affected by these conditions. Since these educators can only see a small proportion of patients directly, new models of care are needed to reach a greater numbers of patients. This 'train-the-trainer' approach is one such model.

Inviting respiratory educators in to general practice offers multiple benefits:

- patients improve their understanding of their condition, medications, devices and action plans
- clinicians improve their knowledge and skills needed for the effective ongoing management of patients
- practices are able to offer more comprehensive and integrated care, increasing patient satisfaction.

How?

Respiratory educators in general practice was one of 13 initiatives supported by COORDINARE. It was part of a project designed to build the capacity and capability of our region's general practices to move towards a PCMH model of care.

With funding from COORDINARE, Moss Street Medical Practice in Nowra was able to pilot two respiratory clinics in 2018; one focused on asthma and the other on COPD. At each clinic, a series of patients were seen individually by their care team which consisted of their GP and primary health care nurse, working alongside the visiting respiratory educator.

To support the upskilling of practice staff, the respiratory educator ran pre and post-clinic education sessions.

Moss Street Medical Practice has since run two additional clinics, without requiring the attendance of respiratory educators, and intends to offer respiratory clinics for its patients in the future.

“Because our clinicians learned so much, they’ve realised they don’t have to wait for a clinic – they can educate their patients any time it’s needed”

– Rhianna Watson, Practice Manager.

Want to get involved?

At different times COORDINARE offers funding to support initiatives such as this. Practices which do not apply or are not selected for funding can still work with us and explore other opportunities. If we are outside of a funding round, we have resources to support practices on their change journey.

For further details on the steps involved to implement this model of care, visit <http://bit.ly/MOCrespiratoryeducators>. For more information or support contact your Health Coordination Consultant, or phone 1300 069 002.

Outcomes

Patients:



improved understanding of their condition and their individual action plan



improved knowledge of correct medication use and medical device technique



increased confidence to self-manage their condition

Clinicians:



improved skills in managing patient respiratory conditions



updated knowledge of respiratory medications plus relevant services and facilities



increased time-efficiency, with less time required to educate patients in subsequent appointments



improved patient satisfaction



no negative impact on day-to-day running of the practice



capacity to run additional clinics and deliver ongoing patient education

The patient perspective



When Sonia Clarke agreed to attend the respiratory clinic at Moss Street Medical Practice, she was struggling to control her asthma, which had flared up as a result of having a head cold.

“I was looking for how I could better handle flare-ups of my asthma, and to get some strategies for managing it better long-term,” she explains. “The clinic turned out to be very positive for me, because I learnt how to use my medication properly. It was eye-opening.”

“I’ve now shown my father-in-law how to use his puffer properly. He’s in his 80s and, like me, has been using his medication and devices incorrectly for a long time.”

Sonia says the biggest benefits of the clinic were being able to focus on the one issue, and having the time to talk through things in detail.

“Normally when you see the GP, you’ve got a few things to cover in a short time. The best thing about a clinic is that you can focus on the one thing, and ask questions without feeling like you’re taking up the doctor’s time.”

The practice perspective



Like all good medical practices, Moss Street Medical Practice is always looking for ways to improve.

“We looked at our patient demographics and saw we had quite a few patients with respiratory conditions needing review”, explains Practice Manager, Rhianna Watson. “We realised this was an area where we could do better, so applied for funding to run this project.”

Primary Health Care Nurse, Lisa McNeil-Watson, says having respiratory educators come in to the practice proved valuable for the clinical staff. “We all felt we improved our knowledge. There are so many new products on the market now; also, technique training is so important to make sure patients are using their medications correctly.”

The practice has subsequently run two respiratory clinics on its own, and is planning to run more.

“But because our clinicians learned so much, they’ve realised they don’t always need to wait for a clinic – now they can educate their patients any time it’s needed,” says Rhianna.