



NRAP Good Practice Repository – Pulmonary Rehabilitation

East Community Respiratory Team - Carlisle
North Cumbria Integrated Care NHS Foundation Trust



KPI6:

**At least one health status questionnaire Minimal Clinically
Important Difference achieved**

East Respiratory Community Respiratory Team Carlisle achieved:

88 % - 2022-23 | 91 % - 2023-24*

*% of patients submitted to the audit.

*The team has consistently performed well against KPI6: At least one Health Status
Questionnaire Minimal Clinically Important Difference (MCID) achieved.*



Our processes to achieve good practice in KPI6:

Pulmonary Rehabilitation staff across sites who run PR pre-assessments (OT/Physio/Assistant Practitioner and Nurses) all use both the COPD Assessment Tool (CAT) and Chronic Respiratory Disease Questionnaire (CRDQ) to achieve this outcome. These are completed on the shuttle walk sessions pre- class and post-class. We accept the core 4 COPD, Bronchiectasis, ILD and Asthma in our programmes.

The Assessments are completed in-between the rest periods of the shuttle walks to allow time to review.

For the CRDQ we have paper copies of the forms specifically for pre and post sessions which are self-directed to complete based on how the patients have felt over the last 2 weeks. In the post-assessment, the initial 5 tasks chosen around breathlessness are inputted beforehand and patients are asked complete how they have felt in the last 2 weeks; however, they are blinded to what they entered in at pre-assessment. We often get them to think of the tasks they usually do that they find makes them breathless. This may not always be listed on the sheet (i.e. putting the bins out, lifting bags in and out of the car). In particular, MRC 2 patients' chosen breathlessness activities may be very different to the suggestions provided. Often patients can get caught up in how to answer if they have not been well and we reinforce to look at how they have been 'in general' over the last 2 weeks.

Help is at hand to support patients if they are unsure, or if they have any literacy or language difficulties.

Patients are asked about any reading or writing difficulties and fill out the questionnaires with the assistance of the staff present where necessary. Staff members are available to provide support or read out the questions if necessary. We do not send any materials to the patient to complete before the assessment. The invitation letter advises patients to bring their reading glasses, but many forget and require assistance or feel overwhelmed by the length of the CRDQ, so staff are on hand to support them.

Key aspects

For the CAT, the questionnaire is shown visually on the screen or a laminated copy and patients are asked verbally to rate from 0 no symptoms/ issues through to 5. This is based on how they are feeling currently.

We believe that the improvements we make in this area are based on a combination of all aspects of the programme - education sessions, the individualised exercise programme but importantly the

PR Good Practice Repository – case study

National Respiratory Audit Programme

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relationships built and 1:1 work we do with patients during the programme in dealing with any issues that may arise such as managing infections, changing medications if required or supporting in signposting to available support that we do not provide.

As an integrated respiratory team leading pulmonary rehabilitation, interventions happen in the timeframe of PR outside of the standard class. The conversations we have with patients may prompt them to think, for example, that they could use an Aerobika, would benefit from a long-term antibiotic, or could use a blue badge that can be facilitated by the clinicians running rehab. Attendance at class, interactions with staff and with other patients are all important in building internal confidence and making patients aware that they have a support network.

We believe a programme that is 'fun' is key to ensuring optimum participation and improvements in domains around emotional function.

We share regularly patient improvement outcomes via 'Success stories' on our Facebook Page (@North Cumbria Respiratory), which we find is an excellent way of promoting the service and inspiring others – some of our patients have come along saying they want to be one of the success stories on Facebook by the end of the programme! These are some recent examples:

<https://www.facebook.com/share/p/ncNhRpe8zCVEe21Y/?mibextid=WC7FNe> Eammon

★ [Another day, another success story..... - North Cumbria Respiratory | Facebook](#) Robert

★ [Success Story](#) ★ 🙌 [Well done to... - North Cumbria Respiratory | Facebook](#) Stuart