Bedfordshire, Luton and Milton Keynes ICB and GSK Joint Working: Optimising COPD care across Bedfordshire, Luton and Milton Keynes

This summary has been written by GSK with consultation and approval from the Joint Working Project Team.

Bedfordshire, Luton and Milton Keynes ICB and GSK are undertaking a Joint Working project. The aims are to:

- Deliver a structured guideline level review for patients with an existing READ code diagnosis of COPD, in line with the GOLD report and aligned to the local COPD prescribing guidelines. Priority review will be provided based on current GOLD severity grading i.e. GOLD group D, followed by C, B and A respectively.
- 2) Validate the COPD disease registers within participating practices including GOLD staging for each patient e.g. 3D. The service will ensure appropriate referral to local pulmonary rehabilitation and oxygen services.
- 3) Ensure alignment to the relevant local COPD guidelines (Bedfordshire and Luton COPD and ACO Guidelines, and Milton Keynes Prescribing Guidelines for stable COPD and ACO)- and the locality formulary.
- 4) Ensure alignment to the Investment and Impact Fund to 'Help create a more sustainable NHS' and the local guideline 'Strategies to support reduced Inhaler carbon emissions' which states: "Consider DPIs or SMIs as first choice, where clinically appropriate".

This involves a balance of contributions from both parties with the pooling of skills, experience and resources. The project will run from August 2022 to May 2023.

Intended Benefits:

Patients	 Full COPD review in line with local guidelines based on GOLD risk stratification to ensure that at risk patients are prioritised for review. Optimisation of both non-pharmacological & pharmacological management. Potentially fewer COPD exacerbations, out of hours/A&E visits and hospital admissions. Better informed about COPD management and treatment options leading to potentially greater concordance with therapy. COPD managed in accordance with current best practice clinical guidance. Better experience of the healthcare system – access to a NSHI respiratory Nurse specialist and/or upskilled primary care clinician at their own GP practice.
NHS	 Validation of the COPD register and signposting of patients for further investigation for patients who may not have COPD or may have other co-existing conditions which may remain, as yet, undiagnosed. Support with patient identification and risk stratification. Additional nurse resource support. Guideline implementation resulting in consistent prescribing and non-prescribing recommendations and promoting learning for sustainability. Insight into COPD population at practice and local healthcare economy level to allow sharing best practice and evaluation of care provision to support clinical governance and support equity of care. Opportunity to upskill primary care doctors and nurses. An environment to support the delivery of improved health outcomes for the COPD patient population. Potential reduction in COPD-related interventions, including hospital admissions. Prescribing in line with national and local sustainability aspirations where clinically appropriate for patients.
GSK	 Broadening of the professional network. Demonstrate partnership working.

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- Potential increase in prescribing of on-formulary dry powder inhaler products within class if clinically appropriate for patients, aligned to the sustainability agenda – which may include GSK products.
- Expansion of the COPD patient population who are managed according to current clinical and best practice guidelines as a result of the programme.
- Increase in the appropriate use of medicines licensed for COPD aligned to local guidance, will likely increase the prescribing of GSK products as well as those of other pharmaceutical companies.
- Better understanding of the challenges faced by the NHS in delivering high-quality patient services and care.
- Helps GSK to live its value of being a patient-focussed company.