PRIMIS

Making clinical data work

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SPACE

SPACE is a comprehensive, easy to use, quality improvement tool designed to enable GP practices to easily undertake a clinical audit of their patients with respiratory disease. The tool helps practices to prioritise patients for clinical review and targets patients whose disease management could be improved through the use a spacer in combination with their pressurised meter dose inhaler (pMDI) thus reducing the risk of exacerbation and hospital admission.

The tool identifies patients with asthma, COPD and bronchiectasis and then stratifies them according to age and disease severity.

This tool is available for use in England in EMIS and TPP SystmOne in clinical system searches in SNOMED CT. The tool is also available to practices in Wales, Scotland and NI using Outcomes Manager and EMIS Web.

The SPACE tool is available free of charge to end users.

Obtaining the SPACE tool

Please apply for access via the online form at:

https://tinyurl.com/CHART-GRASP

Contacting PRIMIS

Web
nottingham.ac.uk/primis

General enquiries
enquiries@primis.nottingham.ac.uk

Benefits of using SPACE

Patient Management

- Medicines optimisation and improved disease management through better use of personalised self-management plans and appropriate devices and medication
- Increased educational support to emphasise the important of medication adherence and compliance
- Encourages patient centred, proactive care by prioritising patients in greatest need
- Patient empowerment to manage their condition through the knowledge that they are receiving maximum benefit from their inhaled medication
- Spacers help to improve drug deposition in the lungs and overcome common coordination issues
- Spacers also help to reduce some unwanted side effects, such as oral thrush

Practice Management

- Facilitates a systematic approach to the identification, prioritisation and optimal management of patients with asthma, COPD and bronchiectasis
- Help practices to prioritise patients for review by highlighting those in greatest need, eg those potentially over reliant on SABA inhalers
- Reports on key factors that are associated with an increased risk of exacerbation
- Provides a proactive framework to support clinical interventions via Structured Medication Reviews (SMRs)
- Helps practices to provide the standards of care recommended in national guidelines such as NICE QS25, QOF etc

Wider NHS

- Supports improved condition management, reducing the associated risk of acute exacerbations and respiratory related hospital admissions
- Potential to reduce costs associated with excess inhaler prescribing due to poor medication absorption
- Highlights overuse of SABA, encouraging systematic review of repeat prescriptions
- Systematic and proactive approach towards optimising care and medication for patients
- Encourages quality improvement, clinical audit and improvements to patient safety

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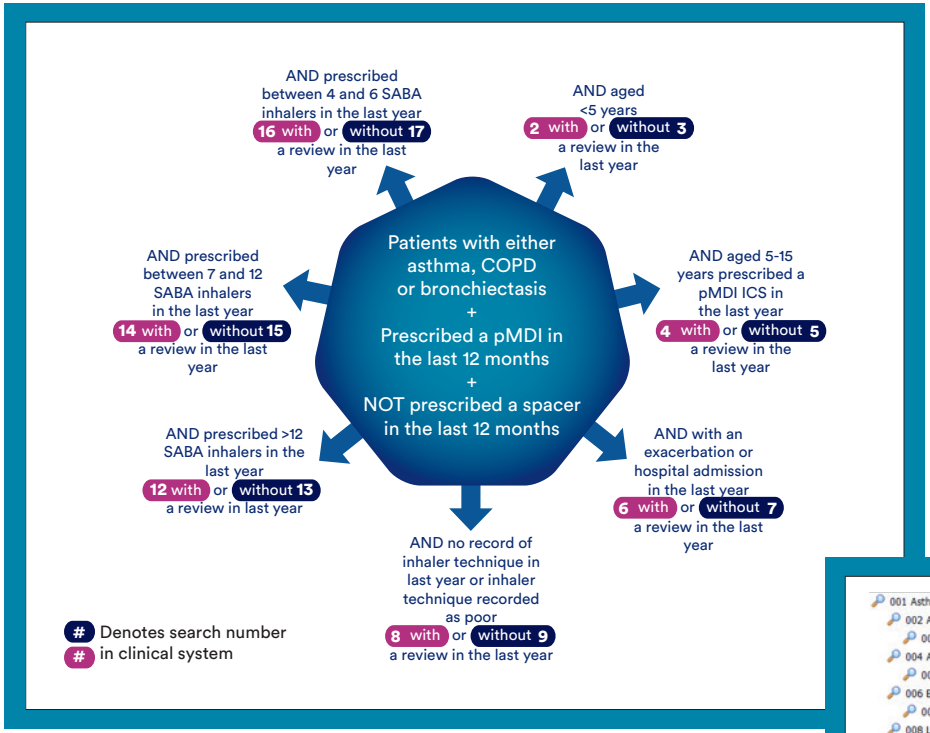
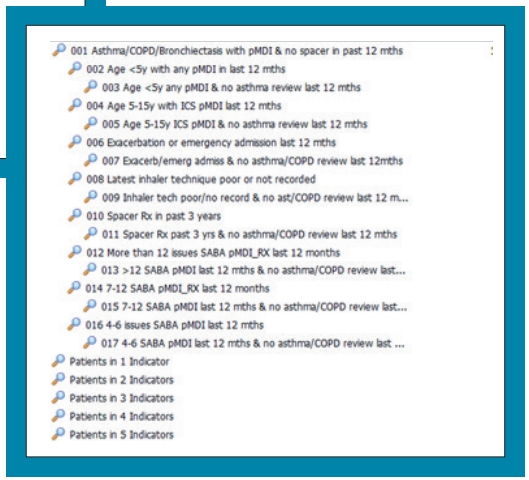
SPACE - system searches



Infographic showing search criteria and patient categories identified for review

The SPACE tool contains native GP system searches that are quick and easy to import and run. These searches are designed to quickly guide practice staff to priority patients for clinical review by grouping patients into seven different categories (as shown in the image left).



Screenshot of SPACE GP clinical systems searches in EMIS Web

Each category contains two searches listing those with or without a recent respiratory review. Each search is numbered for clarity (see both images). Supporting materials are available describing the aim and evidence of each group of patients identified.

Six key actions following use of the SPACE tool

Review patients who appear in more than one indicator (review the composite indicator lists), as they may require support in managing their condition and may benefit most from being prescribed a spacer.

Review the list of patients prescribed more than 12 short-acting B2 agonist (SABA) inhalers in the previous year as this can indicate poor asthmatic control and poorly controlled patients can benefit the most from use of a spacer.

Review patients under the age of five who have no record of a respiratory condition review in the last 12 months.

Review patients under the age of five prescribed a pMDI without a spacer in the last 12 months as a way of improving inhaled medication absorption.

Review patients who have had an exacerbation of their condition or respiratory related emergency hospital admission in the last 12 months.

Review patients for treatment efficacy in line with BTS/SIGN 158 guidance. Refer for specialist assessment, if required.

The SPACE tool is available free of charge. Please request access to the tool and sign the T&Cs at:

https://tinyurl.com/PRIMIS-SPACE

The development of this tool has been funded by Trudell Medical UK Ltd. PRIMIS has retained editorial control and intellectual property rights for this tool.

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