



29 September 2021

Dear Senior Partner/Practice Manager,

**RE: NATIONAL ASTHMA AND COPD AUDIT PROGRAMME (NACAP): PRIMARY CARE AUDIT (WALES)**

Following the publication of the 2018-20 report in March 2021 NACAP is pleased to confirm that it's working towards its third round of the Wales primary care audit.

**NACAP Wales primary care audit 2020/21 – What am I asking you to do?**

The next round of the audit will look at the care and management of people with asthma and COPD between **1 April 2020 and 30 September 2021**, with the reports due to publish in Spring 2022.

Data for the 2020-21 audit will be obtained from the **Secure Anonymised Information Linkage (SAIL) databank**. The NACAP analysis team, based at Imperial College London, will access the pseudonymised data required via the SAIL databank secure server only. Analysed and aggregated results will then be sent to the NACAP and Data Health and Care Wales (DHCW) teams for report production. Outputs will include:

1. **National 'all Wales', local health board (LHB) and cluster reports** which will present fully anonymised and aggregated data at Wales, LHB and cluster levels only.
2. **Practice level reports via the DHCW primary care information portal**. Practice level results, alongside national, LHB and cluster averages, will be available to each individual practice included in the audit alone. Practice data will not be made public, and practices will see their own data only, not data for other practices. This is an added value piece which aims to support in-house quality improvement (QI).

No patient identifiers will be used and access to the data will be strictly controlled within the SAIL IGRP and good information governance practice and requirements.

- **If you are already signed up to SAIL, you will not need to do anything.** However, if you do not wish to be included in the 'added value' practice level primary care information portal piece please respond to me via email by **15<sup>th</sup> October 2021** and I will ensure the NACAP and SAIL teams are informed of this.
- Relevant data will be accessed from the secure SAIL server in November 2021. We do ask that you display a poster in your practice waiting room and, if patients request further information, please provide them with the information leaflet. These are available via the NACAP webpages ([www.rcplondon.ac.uk/nacap-pc-resources](http://www.rcplondon.ac.uk/nacap-pc-resources)).
- **Practices not signed up to SAIL will not be included in the audit.** If you would like to be included in future rounds of the audit, please let me know. SAIL will then send all necessary information.

**What are the benefits of participating?**

By signing up to the audit:

- The NACAP can increase its data set, and therefore get a better picture of what respiratory care looks like across the whole of Wales
- We can work together to help to drive up standards and provide patients with the care they deserve
- Practices can access to individualised reports with benchmarking against cluster, LHB and national performance and a bespoke QI toolkit to support quality improvement (see page 2 of this letter).

The Respiratory Health Implementation Group (RHIG) set the national strategy for addressing respiratory health across Wales, which is outlined in the Respiratory Delivery Plan 2018-2020 (<https://gov.wales/respiratory-health-delivery-plan-2018-2020>). The national approach for Wales is to reduce inappropriate variation in care by standardising the way things are done. The aim is that primary and secondary care become experts at doing the basic things that really matter, consistently well. RHIG have developed and published a host of national diagnostic, management and prescribing guidelines, National

Welsh Standards (NWS) and structured quality improvement, with NHS Wales self-management apps for patients. This is a digital, joined up approach and accessible to everyone in Wales.

### **Is patient consent required?**

Patient consent is not required as no patient identifiable information leaves the practice. In the interest of fairness and transparency, we do ask that you display a poster in your practice waiting room and, if patients request further information, please provide them with an information leaflet. These are available via the NACAP webpages ([www.rcplondon.ac.uk/nacap-pc-resources](http://www.rcplondon.ac.uk/nacap-pc-resources)).

### **Are appropriate information governance controls in place?**

This audit programme submitted an update to the DQS Governance Group in July 2021 and has a SAIL IGRP project reference of **1371**. Finally, the audit been designed to uphold the current seven Caldicott principles and comply with the seven General Data Protection Regulation (GDPR) principles and the Data Protection Act 2018. For more information about this please view the [information governance frequently asked questions](#).

### **Supporting bodies/organisations and commissioners**

The Welsh government, and the RHIG fully support the audit and recognise the importance of quality data collection in order to benchmark standards and drive-up respiratory care across Wales. The Royal College of Physicians delivers the NACAP which has been commissioned since 1 March 2018 by the Health Quality Improvement Partnership (HQIP) as part of the National Clinical Audit and Patient Outcomes Programme.

### **NACAP Wales primary care audit 2018-20 reporting outputs**

If you haven't seen them already, the national audit, patient and local health board (LHB) reports, as well as a quality improvement (QI) slide set with key messages, can be found online at [www.rcp.ac.uk/pc2020](http://www.rcp.ac.uk/pc2020).

Practice level reports are available on the [Data Health and Care Wales \(DHCW\) Primary Care Information Portal](#) to support in-house quality improvement (QI), as well as enable peer review within clusters to help approach improvements at a network level. Participating practices can also access a bespoke NACAP QI portal via the Institute Clinical Science and Technology (ISCT) platform [The official NACAP Quality Improvement Toolkit – ICST](#).

### **Key messages from the most recent report include:**

- Only 11.6% of adult patients diagnosed with COPD in the last two years had a record of the post-bronchodilator FEV1/FVC <0.7 gold standard diagnostic test. This is an increase from 9.6%.
- 76.3% of adult patients diagnosed with asthma in the last two years have a record of any objective measurement. This is a decrease from 79.3%. This was 67.5% for children of 6-18 years old.
- 44.4% of adults with COPD, 48.4% of adults with asthma, 42.8% of children 6-18 years old and 28% of children 1-5 years old had a record of an inhaler technique check in the last year.
- Less than 1% of children and young people had a record of checks around exposure to second-hand smoke.

NACAP is seeking feedback on these outputs and would appreciate you completing this [short survey](#).

If you have any questions regarding the audit programme, please email the NACAP team directly at [NACAP@rcplondon.ac.uk](mailto:NACAP@rcplondon.ac.uk).