

LinkMyCare – COPD Project

Data Capture Users Guide



This user guide has been written to inform General Practices about the data reporting process for the LMC COPD program. It is the responsibility of the commissioned general practice to capture all the relevant data relating to this program. It is expected that the lead Practice Manager / Practice Nurse will be provided with secure access to the reporting document.

Client Sheet Headings

(all patients who are contacted and accept the invite to attend a spiro test are to be added to this sheet)

Client_Key

- ▶ Patient specific ID number (to be used across all worksheets)

Eligible_and_Consent

- ▶ Yes – Pathway 1 (enrolment into the program after a spirometry test)
- ▶ Yes – Pathway 2 (enrolment into the program based on a positive COPD lung function test carried out previously by a respiratory scientist, these patients will proceed straight to the GPMP and COPD Action Plan meeting. Their spirometry test with the respiratory scientist will be carried out later in the program)

Date_of_Birth

- ▶ Patient's Date of Birth – dd/mm/yyyy

Gender

- ▶ Male
- ▶ Female
- ▶ Other
- ▶ Not stated

Aboriginality

- ▶ Aboriginal but not Torres Strait Islander origin
- ▶ Torres Strait Islander but not Aboriginal origin
- ▶ Both Aboriginal and Torres Strait Islander origin
- ▶ Neither Aboriginal or Torres Strait Islander origin
- ▶ Not stated/inadequately described

Residential_Postcode

- ▶ Free text entry of residential address postcode

Country_of_Birth

- ▶ Drop down list of major countries as per SENSWPHN population with Other Overseas as an option too

Main_Language_Spoken_At_Home

- ▶ English
- ▶ Aboriginal English
- ▶ Aboriginal language/s
- ▶ Other

Connected_to_LHD

- ▶ Yes/No based on whether client details have been sent to the LHD – ensure if this field is initially tagged as 'No' that you update to 'Yes' once details shared with LHD.
 - ▶ Yes (Patient Full Name, Patient Date of Birth, Patient Address. This information is to be shared with the LHD).
 - ▶ No (Ensure this data is shared with the relevant LHD within a month of enrolment)

Referral_date_pulmonary_rehab (if applicable)

- ▶ Date the referral is done to pulmonary rehab service/s – dd/mm/yyyy
- ▶ Leave blank if no referral done or client not applicable / not suitable for Pulmonary Rehab

Conditions

Client_Key

- ▶ Patient specific ID number

Diabetes Type 1

- ▶ Yes
- ▶ No

Diabetes Type 2

- ▶ Yes
- ▶ No

Service Contact Headings

Client_Key

- ▶ Patient specific ID number

Date_of_Service_Contact

- ▶ Actual Date when Service_Type carried out – dd/mm/yyyy

Practitioner

- ▶ GP
- ▶ Nurse

Service_Type

- ▶ If Practitioner selected as GP then
 - ▶ Develop GP Management Plan
 - ▶ Develop Team Care Arrangements
 - ▶ Review of GPMP or TCA
 - ▶ Contributions to Multidisciplinary Care Planning
 - ▶ Post hospital discharge meeting with GP
- ▶ If Practitioner selected as Nurse then
 - ▶ Develop COPD Action Plan
 - ▶ Review of COPD Action Plan
 - ▶ Ongoing and/ Scheduled nurse care
 - ▶ Post hospital discharge session with nurse
 - ▶ Post spirometry discussion

Modality

- ▶ face-to-face
- ▶ telehealth-video
- ▶ telehealth-phone

MBS_Item_Number (if applicable)

- ▶ MBS Item Number claimed for General Practitioner work (remember Practice Nurse time is not allowed to be claimed. All service entries where Practitioner selected as GP must have corresponding MBS item number entered that was billed)

Discharge / completion_flag

- ▶ Yes
- ▶ No

If_discharge / completion_yes_reason

- ▶ Still ongoing
- ▶ Finished - completed program
- ▶ Finished - client could not be contacted
- ▶ Finished - client declined further contact
- ▶ Finished - client moved out of area
- ▶ Finished - client referred elsewhere
- ▶ Finished - client deceased
- ▶ Finished - other reason

Spirometry Sheet Headings

(including data from Respiratory Scientist)

Client_Key

- ▶ Patient specific ID number

Spirometry_Date

- ▶ Date Patient visited practice for test – dd/mm/yyyy

Pre_Spiro_COPD_Diagnosis

- ▶ Yes
- ▶ No

If_no_COPD (pre-spiro) reason_for_referral

- ▶ Notes Suggesting COPD (ie no COPD flag however review of notes suggest COPD)
- ▶ COPD suspected (clinical suspicion from referring practice or other clinical service/s)
- ▶ Asthmatic
- ▶ Daily Smoker

Z-Score

- ▶ As per FEV1 – Z-Score on Respiratory Scientist Patient Report

Post_Spiro_COPD_Diagnosis

- ▶ Yes
- ▶ No

If_no_COPD (post-spiro)_other_diagnosis

- ▶ Normal Spiro
- ▶ Asthma
- ▶ Other

EQ5D5L

(Patient Reported Outcome Measure)

Client_Key

- ▶ Patient specific ID number

Collection _date

- ▶ Date EQ5D5L was done – dd/mm/yyyy

VAS

- ▶ Number from 0-100

All others

- ▶ Scale of 1 to 5 ranging from No problems; Slight problems; Moderate problems; Severe problems; Extreme problems or unable to

COPD CAT

Client_Key

- ▶ Patient specific ID number

Collection _date

- ▶ Date COPD CAT was done – dd/mm/yyyy

All aspects

- ▶ Scale of 0 to 5 ranging from 0 being I am very happy to 5 being I am very sad

K10

Client_Key

- ▶ Patient specific ID number

Collection _date

- ▶ Date K10 was done – dd/mm/yyyy

1. In the past 4 weeks, about how often did you feel tired

- ▶ Measure

2. In the past 4 weeks, about how often did you feel nervous

- ▶ Measure

3. In the past 4 weeks, about how often did you feel so nervous that nothing could calm you down

- ▶ Measure

4. In the past 4 weeks, about how often did you feel hopeless

- ▶ Measure

5. In the past 4 weeks, about how often did you feel restless or fidgety

- ▶ Measure

6. In the past 4 weeks, about how often did you feel so restless you could not sit still

- ▶ Measure

7. In the past 4 weeks, about how often did you feel depressed

- ▶ Measure

8. In the past 4 weeks, about how often did you feel that everything was an effort

- ▶ Measure

9. In the past 4 weeks, about how often did you feel so sad that nothing could cheer you up

- ▶ Measure

10. In the past 4 weeks, about how often did you feel worthless

- ▶ Measure

Pulmonary Rehab Headings

(including data from Pulmonary Rehab provider)

Client_Key

- ▶ Patient specific ID number

occasion_of_service_date

- ▶ Date of pulmonary rehab service delivery – dd/mm/yyyy (each time the patient attends a PR session, this will need to be listed as an 'occasion of service'. This data will be provided to the referring GP / PN by the pulmonary rehab provider in their final report.

modality

- ▶ face-to-face
- ▶ telehealth-video
- ▶ telehealth-phone

discharge/completion_flag

- ▶ Yes (if either the client has completed the program in that respective service entry date or client has been confirmed to be discontinuing / disengaging from the pulmonary rehab program as assessed by the provider)
- ▶ No (this is a regular occasion of service as part of the planned program)

referral_to_Lungs_in_Action_group

- ▶ Yes
- ▶ No

Pulmonary Rehab St George Respiratory Questions Scores

Client_Key

- ▶ Patient specific ID number

Collection _date

- ▶ Date SGRQ was done – dd/mm/yyyy

SGRQ_Score

- ▶ Number from 0-100

Hospital Headings

(including data from LinkMyCare CNCs based in Local Health Districts)

Client_Key

- ▶ Patient specific ID number

Date_of_general_practice_post_hospital_discharge_meeting

- ▶ dd/mm/yyyy

Longitudinal PREM Questionnaire

Client_Key

- ▶ Patient specific ID number

Collection _date

- ▶ Date PREM was done – dd/mm/yyyy

A link to the survey will be provided in the ‘data capture’ worksheets.