

National Survey

The roles and training of respiratory nurses in the UK

Objective	To describe nurse-led asthma and chronic obstructive pulmonary disease care (COPD) in general practice in the UK To describe the training undertaken to support nurse-led asthma and COPD care
Method	Questionnaires were sent to 500 randomly selected UK asthma and COPD practice nurses The response rates were really good which means the results can be generalised across all UK General Practice. The distribution of these practices is geographically representative of practices across the UK Non responders were personally contacted and reminded to return their questionnaire and sent two reminder letters All relevant NHS governing bodies in England, Northern Ireland, Wales and Scotland were advised that the survey was being conducted
Details of the questionnaire	The questionnaire recorded practice list size, types of designated respiratory clinics run by the practice, and both the role and training of lead asthma and COPD nurses. Respondents were asked to report if their practice ran one or more of the following types of designated respiratory clinic: asthma, COPD and/or mixed respiratory - or saw patients in generic appointments. The questionnaire included a list of key tasks performed during consultations and asked who normally performs each type of task. Nurses were required to state all relevant training they had obtained
Analysis	Nursing roles were divided into 3 levels: basic, intermediate or advanced Training were categorised as accredited (diploma/degree level modules recognised by a University), or non-accredited (short courses, pharmaceutical company sponsored meetings and in-house training) Data was analysed to ascertain the proportion of nurses without accredited training by role level and by practice size
Results	
Numbers of respondents to each section of the questionnaire	382 (76%) respondents completed the practice characteristics section 389 (78%) described their asthma roles and training 368 (74%) described their COPD roles and training 96 practices (25%; 95%CI 21-29%) ran designated asthma clinics 87 (23%; 95%CI 19-27%) ran designated COPD clinics 170 (45%; 95%CI 40-49%) did not run designated respiratory clinics
Role of practice nurses	Over half of nurses providing asthma or COPD care were working in an advanced role (that is, they autonomously conducted diagnostic and follow-up consultations) Approximately one third held an intermediate role (that is, they conducted follow up consultations or, were involved in making the original diagnosis, but not both)
Numbers of nurses without training - Asthma	Of 255 nurses with an advanced asthma role, 51 (20%; 95%CI 15-25%) had no accredited training Of the 51 nurses with no accredited asthma education but with an advanced role in the care of patients with asthma, 21 (41%) reported that a GP was not always immediately accessible to be referred to if required when they were seeing patients
Numbers of nurses without training - COPD	Of 215 nurses with an advanced COPD role, 111 (52%; 95%CI 45-58%) had no accredited COPD training. 198 (92%; 95%CI 88-96%) had not obtained accredited spirometry training. Of the 111 nurses (52%; 95%CI 45-58%) with no accredited COPD training but with an advanced role in the care of patients with COPD, 50 (45%) reported that a GP was not always immediately accessible when they were seeing patients
Numbers of nurses recommending choice of therapy but with no accredited training	Most of the nurses with an advanced role, and a high proportion of those with an intermediate role, recommended choice of therapy during consultations: Of those recommending asthma therapies, 35% (26/74) in an intermediate role and 19% (47/249) in an advanced role did not have accredited training Of those recommending COPD therapies, 85% (53/62) in an intermediate role and 50% (102/205) in an advanced role did not have accredited training