

Report at a glance

Results are based on 19,360 patients admitted to hospital with an asthma attack who were discharged between 1 April 2019 and 31 March 2020.



28.3%

of all patients had a peak flow measurement recorded within 1 hour of arrival at hospital



QI priority 1: Ensure 90% of patients presenting with an asthma attack are assessed for asthma severity, including measurement of peak flow, within 1 hour



52.9%

of all patients had this taken within 4 hours of arrival at hospital



74.6%

of patients had this taken at some point during admission to hospital



21.2%

of patients had no peak flow measurement recorded during their admission (4.1% of patients were recorded as too unwell to have their peak flow measurement taken)



81.1%

of patients were reviewed by a respiratory specialist during their admission



QI priority 2: Ensure 90% of patients receive respiratory specialist review during hospital admission



68.4%

of all patients received a respiratory specialist review within 24 hours of arrival (weekdays, Monday 8am – Friday 5pm)



56.0%

of all patients received a respiratory specialist review within 24 hours of arrival (weekends, Friday 5pm – Monday 8am)



30.6%

of patients were administered systemic steroids within 1 hour of arrival at hospital*



QI priority 3: Ensure 95% of patients who have not been administered systemic steroids as part of pre-hospital care are administered this treatment within 1 hour of arrival at hospital



65.8%

of patients were administered these within 4 hours of arrival*



87.4%

of patients were administered these at some point following arrival at hospital*

*Please note that the audit dataset did not collect data on the proportion of patients who received their first dose of systemic steroids prior to arrival at hospital in this round of reporting.



The proposed adult asthma best practice tariff (BPT)

These metrics are:

- > provision of respiratory review within 24 hours of arrival and
- > provision of specific elements of good practice asthma care by discharge:
 - inhaler technique checked
 - maintenance medication reviewed
 - personal asthma action plan issued/reviewed
 - tobacco dependency addressed (if current smoker).

Audit results – best practice tariff



28.8% of patients received all mandatory BPT elements

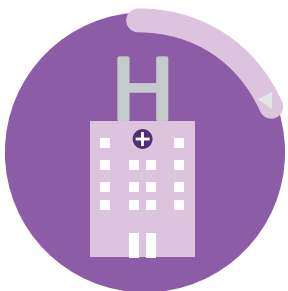
52.4% of patients received a specialist respiratory review within 24 hours

64.8% of patients had their inhaler technique checked

78.7% of patients had their maintenance medication reviewed

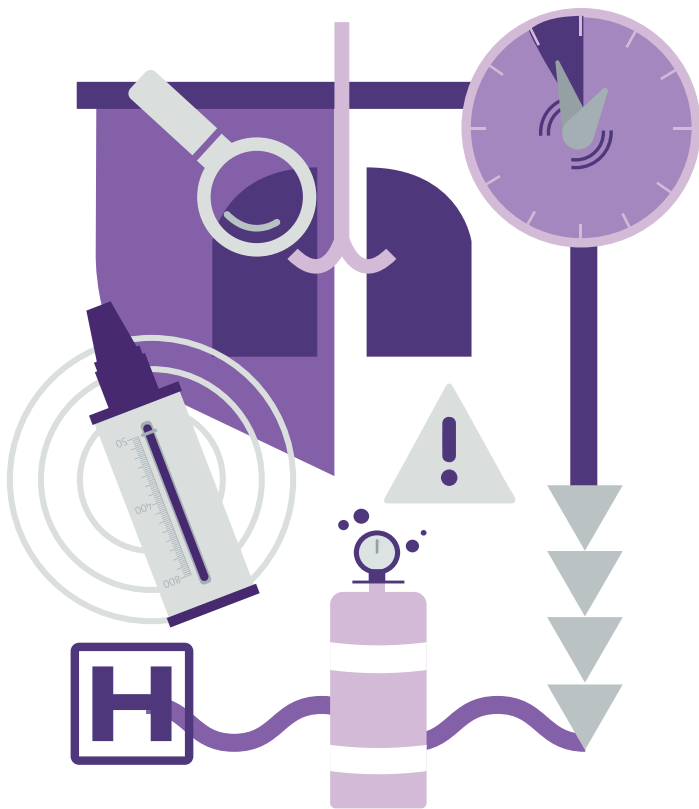
47.4% of patients had a personalised asthma action plan issued/reviewed

67.7% of patients had their tobacco dependency addressed (if current smoker)



18.5%

of hospitals met all of the requirements to achieve the BPT

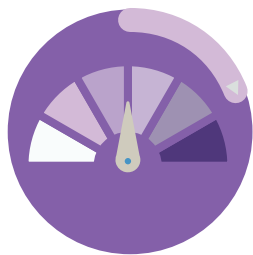


The first hour of care

For adult patients admitted to hospital with an acute asthma exacerbation, the aim is to achieve:

- > assessment of asthma attack severity within 1 hour (peak expiratory flow (PEF) taken)
- > administration of bronchodilators (β_2 agonists) within 1 hour
- > administration of systemic corticosteroids within 1 hour
- > assessment of oxygenation and prescription of an oxygen target saturation range of 94–98% within 1 hour.

Audit results – The first hour of care



19.0%

of patients had their peak flow taken within 1 hour of arrival at hospital



37.3%

of patients were given β_2 agonists within 1 hour



26.7%

of patients were given systemic steroids within 1 hour

Audit results – Oxygen prescription and administration



18.1%

of patients were only prescribed oxygen



16.5%

of patients were administered oxygen with no prescription



22.5%

of patients were both prescribed and administered oxygen



42.9%

of patients were not prescribed or administered oxygen