

6.4 COMMUNITY ACQUIRED PNEUMONIA IN ADULTS

Community acquired pneumonia refers to pneumonia acquired outside of hospitals. It is estimated that 14,000 people are treated for community acquired pneumonia in Northern Ireland each year.

Pneumonia can be a serious illness affecting the lungs. It is caused when harmful germs get past the defence systems of the lungs and start to multiply, causing infection. Often, these germs are already present in the nose and throat. Sometimes they are in tiny droplets in the air (for example, after someone sneezes), and they are then breathed in. The infection may be in both lungs or in only one.

People are more at risk of getting pneumonia if they are elderly, smokers, or if they drink a lot of alcohol. People are also more at risk if they already have another serious illness, making the body, and its natural defences against infection, weaker.

It is important that people who have severe enough illness to require admission to hospital receive treatment according to the highest standards available, as this treatment reduces the number of deaths and complications of pneumonia.

Overarching Standard 26:**Assessment, diagnosis and treatment**

All patients with suspected community acquired pneumonia (CAP) should be assessed, diagnosed and treated according to BTS pneumonia guidelines.

Rationale:

Appropriate assessment, diagnosis and management according to evidenced based guidelines leads to a reduction in morbidity and mortality.

Evidence:

British Thoracic Society (BTS) (2004) Guidelines for the management of Community Acquired Pneumonia in Adults (Update due in Autumn 2009)

<http://www.brit-thoracic.org.uk/ClinicalInformation/Pneumonia/tabid/106/Default.aspx>

Scottish Intercollegiate Guidelines Network (SIGN) (2002) Community Management of Lower Respiratory Tract Infection in Adults No. 59

<http://www.sign.ac.uk/guidelines/fulltext/59/index.html>

Responsibility for delivery / implementation

HSC Trusts
Primary Care

Quality Dimension

1. Assessment and diagnosis should be performed according to BTS pneumonia guidelines.
2. Patients in the community should be assessed the CRB-65 tool (This is a method of scoring severity of community acquired pneumonia in people aged more than 65, using scores relating to confusion, respiratory rate and blood pressure).

Performance Indicator	Data Source	Anticipated Performance Level	Date to be achieved by
Percentage of inpatients diagnosed with CAP who meet the BTS adult pneumonia guidelines for diagnosis and treatment	PAS Hospital records BTS audit pro forma Rolling audit	60% 80% attaining 4 out of 5 key items each year	March 2011 March 2012