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Conference Abstract

## **HelsaMi: User-centred design of an integrated care service for people with severe Chronic Obstructive Pulmonary Disease**

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### **Abstract**

**Description of project:** People with Chronic Obstructive Pulmonary Disease (COPD) are frequently hospitalised. The most severe cases have a constant pattern of relapses, and represent major consumers of health services. Designing services and technology that can reduce hospitalisation and improve home-based treatment can contribute to improve the quality of life for people living with COPD and reduce health care costs.

In the ongoing project, "HelsaMi", Trondheim municipality and St. Olavs Hospital, Trondheim University Hospital in Norway are working with SINTEF to design an integrated service for people with COPD. Through a tablet computer application, which is developed together with industry, people with COPD can report daily on their health situation. Health care workers respond with preventive measures when needed. The objective of the project "HelsaMi" is to increase quality of care, prevent exacerbations and reduce the number of hospitalizations for people with COPD. Target population: People who are diagnosed with severe COPD.

**Methodology:** In "HelsaMi", we apply a user-centred, qualitative approach, which includes the use of methods such as focus groups and individual semi-structured interviews to generate an understanding about user needs. A total of eleven people with COPD have contributed in the activities.

The activity of gathering user needs and requirements is followed by design and evaluation of services and technology in an iterative process. All major stakeholders are involved in the process and the project team is interdisciplinary, with health care workers, designers and ICT developers among the team members.

**Highlights:** The main preliminary results from our work can be summarised as follows: (1) Involving users in the design process is vital to ensure that the design meet actual user needs. The users give both inspiration and corrections in the design process; (2) There is a need for increased competence on COPD in the municipality, to be able to fulfil their intended role in the service; (3) People with COPD often have several diagnoses, which increases the needs the service should meet; (4) Patients have a need for thorough information about COPD, especially at an early stage after being diagnosed with COPD; (5) Involving all major stakeholders is necessary for decisions made in the project to be carried out in real life.

**Transferability:** The services and technology that are developed as part of the project are evaluated in Trondheim, Norway. Other Norwegian municipalities and Regional Health Authorities are following the developments of the project, and looking to integrate the results in their own

services for COPD- patients. The service might also be relevant for other chronically ill patients, but this will have to be explored and validated through further mapping of user needs.

## **Keywords**

**COPD, integrated care, technology, user-centred design, interdisciplinary**

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## **Powerpoint presentation:**

<http://www.integratedcarefoundation.org/content/integrated-care-practice-collaborative-practice-integrated-care>

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