

## POSTER ABSTRACT

### Caring Together 2 Breathe Easy: an integrated care trial to reduce readmission and improve the health care experience for people with COPD.

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Wayne George Middleton<sup>1</sup>, Donna Ward<sup>1</sup>, Simon Finnigan<sup>1</sup>, John Adie<sup>2</sup>, Chrissie Norton<sup>2</sup>

1: Caboolture Hospital, Australia;

2: Morayfield Family Doctors, Australia

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**Introduction:** As evidenced in "Perils of Place – Identifying hotspots of health inequality" (Duckett, 2016), Caboolture (Queensland) was highlighted as having a 10 year history of higher than average readmission rates for patients with Chronic Obstructive Pulmonary Disease (COPD).

A new Integrated Pathway of Care is being trialled for COPD patients (n=30). Key collaborators include: the Caboolture Hospital Emergency Department and Respiratory Service; GP practices, Queensland Ambulance Service and key community services.

The model of care, known as Caring Together 2 Breathe Easy was developed in collaboration with Canterbury Health in New Zealand. This model employs a patient focus to improve QoL by implementing COPD Action Plans and ensuring that the patient, their GP, Ambulance and the Emergency Department utilise this plan, including alternatives for acute care.

A "Breathe Easy" team: GPLO, Clinical Nurse; Physiotherapist and Psychologist, work with the participants to implement action and intervention plans. Participants are provided with a pack which includes their COPD action plan, contact plan and educational materials.

#### **Aims and Measures:**

Reduced ED presentations and re-admission rate within 28 days

Improved QoL measured by COPD Assessment Tool (CAT) and meeting individual goals

Identification of secondary anxiety and depression (K-10) and linkage to supports

Improved GOLD Score

Increased access and connection to health and community services

Developing integrated pathways with health and community services.

**Targeted Population and Stakeholders:** Patients with a diagnosis of COPD and a history of re-presentations and/or re-admissions to the Caboolture Hospital within 28 day within the past two years (N=30)

Middleton; Caring Together 2 Breathe Easy: an integrated care trial to reduce readmission and improve the health care experience for people with COPD

Participants reside in the Caboolture community which has recognised unmet health needs and high levels of socioeconomic disadvantage (Source: The Social Health of Australia: Data by population area, Population Health Information Data Unit 2016)

**Timeline 2017:**

Feb: Cohort selected

March- April: Recruitment, Assessments

May-Jun: Action Plans

July-October: Interventions

Nov-Dec: Evaluation

**Highlights:**

COPD Action Plans developed for all patients;

High levels of consumer engagement with Breathe Easy Team and Project;

Interventions commenced;

Improved engagement and co-operation across secondary hospital, primary care, ambulance and community agencies.

**Sustainability:** The intention is to upscale and embed the “Breathe Easy” pathway trial at an organisational and local community level.

**Transferability:** If successful, the “Breathe Easy” trial outcomes will contribute to models of integrated care that can be applied to a range of patient groups requiring integrated care.

**Conclusions:** Caboolture Hospital “Breathe Easy” project is demonstrating high levels of engagement and support from consumers, health care providers and the community. The multi-level evaluation data will provide evidence and inform viability for up-scaling and consolidation as an alternative health care service model in Caboolture and more broadly in Metro North HHS.

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**Keywords:** COPD; chronic disease; integrated care

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