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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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 representations and/or re-admissions to the Caboolture Hospital within 28 day within the past two years (N=30)
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.

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