POSTER ABSTRACT

Early lessons from a Virtual Pulmonary Rehabilitation (VIPAR) Service

19th International Conference on Integrated Care, San Sebastian, 01-03 April 2019

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Within Hywel Dda University Health Board, the Welsh Government expectations for managing patients with chronic respiratory conditions are not being adequately met. The Pulmonary Rehabilitation (PR) service does not exist in Ceredigion; there is a limited service in Pembrokeshire; and the service in Carmarthenshire now has an 8-12 month waiting list. By working in partnership with industry the PR team have developed a Virtual pulmonary rehabilitation (VIPAR) service; consisting of a hub and spoke model of delivery using video-conferencing to link the hub site in Carmarthenshire, to a spoke site in Ceredigion that upholds the principles of prudent healthcare.

VIPAR provides a service to patients in a more timely fashion, as the health board is unable to offer Pulmonary Rehabilitation to COPD patients admitted to hospital (with an exacerbation of their COPD) within 2 weeks post discharge. The partnership worked to increase the efficiency and equity of service provision for Pulmonary Rehabilitation programs in rural areas, using video-conferencing (VC). The project capitalized on an investment opportunity, expanding on the existing model of delivery, to enhance the provision of pulmonary rehabilitation, reduce inequalities and encourage community resilience.

The project fits the needs and circumstances of the citizen, by allowing service delivery closer to home and creating access where previous there was none. Health improvements were gained by all participants attending the program. The results were comparable between the hub and spoke site participants and were clinically important. Without the VIPAR service, patients would not have received PR intervention nor the health benefits.

VIPAR has also shown to reduce drive time for patients; this reduces the carbon footprint of the service. By developing more spoke sites in rural areas both staff and patients will no longer need to travel long distances to access / deliver the service.

Keywords: pulmonary rehabilitation; copd; video conferencing