
CONFERENCE ABSTRACT

Using Co-design Process to Develop an Integrated Self-management Intervention Program for COPD patients in Nepal.

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Background: Globally, Primary Health Care (PHC) is recognised as central to improving health for all, yet COPD patients in Nepal are not receiving adequate PHC, because of limitations in the six building blocks of the health system as proposed by World Health Organisation in 2007. Therefore, there is a need to strengthen the capacity of community-level health institutions and health professionals by facilitating integrated care to improve self-management support for COPD patients.

Objectives: We aimed to develop and prototype a model of care linking primary and tertiary care components to improve self-management practices (SMPs) of COPD patients in Nepal.

Methods: Based on a survey and qualitative study in 2018, we have developed integrated care and intervention to address locally identified problems. We refined our model (prototyping) in two small stakeholders meeting and a final co-design workshop in May-June 2019 with 60 stakeholders consisting of patients, carers, providers, researchers, and policymakers. During the co-design workshop, a series of presentation and a 50-minute brainstorming session was conducted in groups of six participants to collect their inputs on the proposed model of care and intervention components.

Results: Through a facilitated workshop using consensus decision making, patients, local government, primary health care workers, policymakers, academics, and community representatives worked together to refine an integrated model of care. The resultant integrated model will include: screening of COPD at the community and management of symptomatic patients at primary health care, establishing referral pathway for severe cases to tertiary level health care and establishing community care. Our presentation will include: steps in the co-design process and results from prototyping with stakeholders.

Conclusion: Our integrated, contextually-appropriate model of care and intervention should improve the quality of care and quality of life for COPD patients.

Lesson learned: Engagement of patient, carers, providers, and policymakers in developing a model of care creates a sense of ownership among the stakeholders.

Yadav; Using Co-design Process to Develop an Integrated Self-management Intervention Program for COPD patients in Nepal.

Suggestions for future research: This refined Integrated Self-management Intervention Program will be tested to improve SMPs, quality of care, and quality of life for COPD patients.