# Hospital 2 Home: Scaling Up Innovative COPD Care

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In Canada, COPD is the fourth leading cause of death and a leading cause of adult emergency department (ED) visits and hospitalizations[1], contributing to high healthcare expenditures (COPD acute exacerbations account for >$750 million/year in hospital-based costs[2]).

In 2014 CFHI launched **INSPIRED Approaches to COPD**, a pan-Canadian quality improvement collaborative based on the successes of INSPIRED in Halifax and the need in across Canada. The collaborative supported 19 teams.

The **INSPIRED COPD Outreach Program™** - a holistic and community-based approach to COPD care - achieves consistent reductions (50-70%) in hospital visits, while improving experience and coordination of care for patients/families.[3]

## 2014-2015 RESULTS

The INSPIRED spread collaborative (2014-2015) enabled 19 teams to adapt and implement an evidence-based and patient-centred innovation for the care of patients with advanced COPD. Patient outcomes and results demonstrate improved quality of care delivered through local INSPIRED programs, with greater self-confidence in symptom management. Teams acquired new skills and a demonstrated ability to measure and implement improvements to COPD care. Teams optimized patient care by developing action plans, self-management support, psychosocial support, advance care planning, and coordinated community partnerships with allied health professionals. Spreading and scaling INSPIRED across Canada over the next five years would provide better care to 14,000 Canadians (the estimated number living with advanced COPD) and prevent $688-million in healthcare costs.

| Hospital or Health System/Region | Reduction in Hospital Use for INSPIRED patients | |
|---|---|---|
| | ED Visits | Hospital Remissions |
| Alberta Health Services (Edmonton Zone) | - 47% | - 54% |
| Health PEI | - 40% | - 52% |
| Joseph Brant Hospital (Ontario) | - 46% | - 70% |
| Nova Scotia Health Authority | - 58% | - 62% |
| Winnipeg Regional Health Authority (Manitoba)* | N/A | N/A |
| Horizon Health Network (New Brunswick)** | N/A | - 69% |

**19** Teams adapted and implemented an evidence-based and patient-centred innovation for the care of patients with advanced COPD.

**1,011** Patients enrolled; patients reported greater self-confidence in symptom management, return to daily activities, and enhanced functional status.

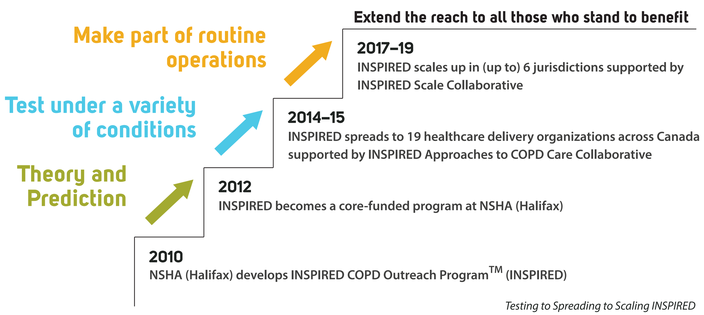
**80%** Reduction in ED visits and hospitalizations with early reductions as high as 80%, lowering to 40-50% in the 6–12 month period post-collaborative.

**$21** Every dollar invested in INSPIRED avoids $21 in hospital costs[5].

## SCALING UP "INSPIRED"

CFHI has launched a scale collaborative(2017-2019), '**Home is Where the Health Is: Scaling up INSPIRED approaches to COPD care**,' to help six health systems/regions extend the reach. The collaborative also aims to identify the policy and system barriers and enablers to the broader scale-up of a successful health care innovation.

The six participating teams have achieved significant improvements to date; and have demonstrated readiness to scale up their INSPIRED COPD care programs.




*Testing to Spreading to Scaling INSPIRED*

The ultimate goal is to continue expanding INSPIRED across Canada until all patients who could benefit have access to the program. By intentionally examining the system and policy changes necessary to support these scale teams, CFHI hopes to identify the barriers and enablers to scale innovations, not only for COPD patients, but for all patients living with chronic disease.

**By March 2019, the teams estimate they will reach an additional 2300 people living with advanced COPD across up to 39 hospitals and 13 primary care organizations.**

"Before INSPIRED, I lost hope about ever managing my COPD symptoms, but the INSPIRED team has helped me get back into the 'driver's seat' again… my family can't get over the change in me!"

- Patient, Joseph Brant Hospital

A mixed-methods summative evaluation of the 2014-2015 spread collaborative was carried out between November 2015 and April 2016. As this was a QI initiative, research ethics board (REB) approval was not required; however, some teams did seek local REB approval. A mixed-methods evaluation will also be completed for the 2017-19 initiative.

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[1] CIHI. 2015. Inpatient Hospitalizations, Surgeries, and Childbirth Indicators. https://secure.cihi.ca/estore/productfamily.htm?pf=PFC2805&lang=fr&media=0

[2] Mittmann N, Kuramoto L, Seung SJ, Haddon JM, Bradley-Kennedy C, Fitzgerald JM. The cost of moderate to severe COPD exacerbations to the Canadian Healthcare System. *Respir Med*. 2008;102(3)413-21.

[3] Rocker GM, Verma JY, Demmons J, & Mittman N. Number needed to… Save? *Clin Invest Med*. 2015; 38(1): E11-E14

[4] Smetanin, P, McNeil, D and Burger, C. 2016. Modelling of CFHI's INSPIRED Program. RiskAnalytica.

[5] CFHI. 2016. INSPIRED Approaches to COPD Patient Stories. http://www.cfhi-fcass.ca/WhatWeDo/inspired-approaches-to-copd/stories