Summary of the COPD Digital CHAMP Evaluation

(Coaching Health App Implementation Partnership)

For the full evaluation reports, click <u>here</u>.



Project Background

Chronic obstructive pulmonary disease (COPD) prevalence across Bristol, North Somerset and South Gloucestershire (BNSSG) is rising, as it is across England. There is a growing need to actively deploy and pilot digital innovations to assess how they can support patient safety and care whilst reducing cost and demand upon services.

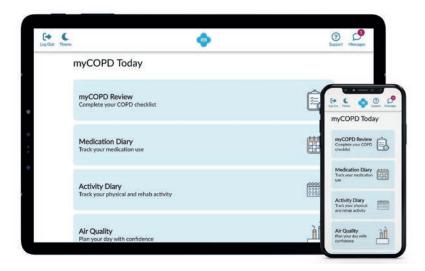
myCOPD is an app, developed by my mHealth, which helps people with COPD to manage their condition effectively, thereby reducing the number of healthcare visits required.

Historical attempts to deploy digital technology without clinical leadership and detailed implementation plans have led to varied patient uptake and success.





The COPD Digital CHAMP project ran as a rapid pilot from October 2021 to September 2022. The project aimed to address the variation in uptake by using Digital Health Champions (DHCs), working within a COPD Digital Champion Service, to increase the use of the myCOPD app. It brought together leading experts in digital technology, research, user engagement and clinical teams across the BNSSG Integrated Care Board (ICB). Project management was provided by the West of England AHSN.



The COPD Digital Champion Service approach

The COPD Digital Champion Service was designed to support busy NHS staff and patients to get the best out of the myCOPD app, by improving patient recruitment, uptake, and engagement.

- DHCs were recruited from two acute trusts and one community trust, providing a cross-organisational service.
- DHCs had a variety of backgrounds and were already integrated into local systems with in-reach capabilities.
- All DHCs received Motivational Interviewing training to support patient engagement, in recognition of the challenges of changing behaviour, particularly around digitalisation of care.
- DHCs were supported by a Clinical Champion (CC), who worked in their own, respective, organisations and in primary care.

The evaluation

A mixed-methods approach was carried out to understand the impact of DHCs on the uptake and ongoing use of the myCOPD app.

The quantitative evaluation, completed by Unity Insights, sought to understand the engagement levels of the DHC-enabled myCOPD users, their characteristics and demographics of patients who accepted enrolment on to the app. The evaluation did not focus on the impact of the app itself, only the additional benefit of using DHCs to support rollout.

A second evaluation, completed by the University of Bath, reviewed findings through a two-phase qualitative approach. The qualitative data aimed to explore the barriers and facilitators of patient and clinical engagement with the app, to help inform ongoing implementation and provide recommendations to ensure acceptability. Stakeholder experience of the COPD Digital Champion Service and its implementation was also explored.

The COPD Digital Champion Service pathway



Referrals were received from all parts of the ICB; primary, secondary and community care.



During the first
appointment, the DHC
introduced the patient to the
app, what it has to offer and
enrolled them. Patients were
followed up at 1, 3 and
6 week intervals; however,
this schedule varied
depending on patient need
and availability.



At each appointment, the DHC would discuss different app features through a person-centred approach; this was guided by what the patient felt they needed to focus on, and any goals set by the referring clinician.



Once confident to use the app, patients were discharged from the service and continued with self-management.

What we found

Finding 1: DHCs increase the utilisation of the myCOPD app and demonstrate a positive benefit to cost ratio

- Use of DHCs led to significantly more patients becoming sustained 'very high' users of the app, and therefore more likely to yield benefits to patients and the healthcare system.
- Positive benefit to cost ratio of 1.2 projected across a five-year period. This means that, over the five-year period, for every £1 spent on the Digital Champion Service, an estimated saving of £1.20 would be expected.
- Patients felt supported and able to engage with accessible digital technology.



"I always find that
if you speak to
somebody it goes
in better than just
looking at a screen"
(Patient)

Finding 2: DHCs act as enablers to overcome barriers in the use of digital technology and patient demographics do not appear to impact app enrolment (when support is in place)

- Smoking status, age and gender did not make a significant difference on whether an individual would enrol to myCOPD, or become a sustained, high-frequency user of the app. However, there is often a perception of age being a barrier, this perception should be addressed in future roll outs.
- Patient barriers included concerns that the app was a replacement (rather than a support) for their existing care, and concerns around how different functions within the app could improve their care.
- A referrer guide was helpful for healthcare professionals to address patient concerns and support patient engagement with often limited resources.
- A personalised approach is required to ensure that the benefits of digital tools are experienced by patients.

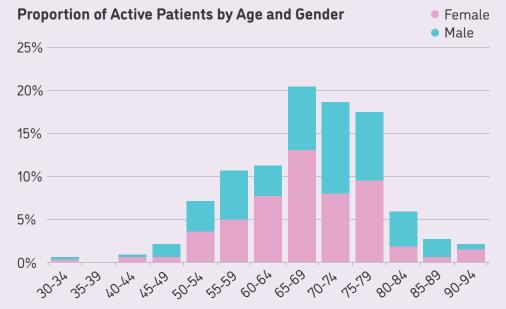
"I think there is so
much information on
there which could get
overwhelming. So it's good
to be able to break
it down and just focus
on a little bit at a time"
(Clinical Champion)

For every £1
spent on the
Digital Champion
Service, £1.20
would be saved

Finding 3: Implementation and sustainability of the service

- Partnership working was key to setting up and implementing the service and also identified barriers to implementation, such as governance regulations around data sharing.
- Clinicians need to be clear about how the app complements the clinical pathway and have a good understanding of the evidence around digital technology to embrace their role.
- A service lead, along with project management and clinical lead roles, would be best placed to fully embed the service.
- Decisions regarding referral to DHCs should not be made based on perceptions around the digital literacy of patients.
 Patients can be supported to improve their digital literacy by the DHCs and through linking in with local support services.

Grouping of the myCOPD app users



Summary

Our evaluation has
demonstrated that
establishing a crosshealth system COPD Digital
Champion Service is feasible
and that recruiting DHCs to enrol
and support patients to use the
myCOPD app has a positive impact on
patient activation and engagement rates,
and overall provides value for money.

For the full evaluation reports, click <u>here</u>.



Thank you

We would like to thank all trusts and Primary Care Networks across Bristol, North Somerset and South Gloucestershire for their engagement and dedication to the COPD Digital CHAMP project. Thank you for contributing to this evaluation which has enabled us to understand the effectiveness of the COPD Digital Champion approach.

Get in touch

The West of England AHSN is one of 15 AHSNs in England set by the NHS in 2013, to spread innovation in health and care.





