A VIRTUAL hub providing care with the mandate “wherever and whenever the patient should have the best service” is revolutionising care for patients with Chronic Obstructive Pulmonary Disease (COPD).

The holistic approach by the COPD Integrated Services Project helps to better manage their condition by providing better support when they have acute attacks and the opportunity for any psychological and social needs to be addressed in the community.

The aims of the project were to integrate existing services to create more streamlined pathways, improve patient care, increase self-management skills and avoid unnecessary hospital admissions.

The outstanding results they have achieved made them worthy winners of this year’s Care for Mental Health category.

The project brought together acute, community, emergency and out of hours services together to create a community based respiratory hub, which ensures patients have the right service for them at the right time and in the right place.

Specialist respiratory physiotherapists, advanced nurse practitioners, respiratory consultants and nurses and pharmacists help the patient to manage their physical illness. Meanwhile, clinical psychologists and specialist occupational therapists support patients to adjust to living with the condition and manage the high levels of anxiety, panic and low mood that go hand in hand with the disease.

The hub also includes the Grapevine Disability Information Service to provide financial and social support and signposting to housebound patients with COPD. Using telehealth technology, the hub assists in the management of a patient’s condition by monitoring vital signs, such as blood pressure, and transmitting the data, via a telephone line or broadband, to a monitoring centre, where it is checked against parameters set by the individual’s clinician.

This technology enables their health condition to be monitored regularly to flag up issues before they become “care critical”.

Although the hub is virtual, there are twice-monthly multi-disciplinary team meetings during which patients at risk of hospital admission or who have had more than two admissions in the last 12 months are discussed.

Since its inception, the hub has saved 1549 bed days and prevented 285 hospital admissions through various initiatives.

The project has had hugely positive effects for patients, carers and healthcare professionals and has provided a model for the management of other long term conditions.

It exemplifies the Government’s 2020 Vision for Health and Social Care.

This states: ‘Our vision is that, by 2020, everyone is able to live longer, healthier lives at home, or in a homely setting’.

IMPROVING KIDS’ OUTPATIENT EXPERIENCE

The experience of children accessing rheumatology services has been transformed due to the vision of a Scots doctor and her specialist team.

Joyce Davidson and the Paediatric Rheumatology Team have worked with, and advised, charities to support patients with rheumatic conditions in order to improve the experiences of children accessing services across the whole of Scotland.

As well as travelling to different hospitals throughout Scotland to provide continuity of outpatient care, the team has been instrumental in improving the waiting room experience for children and the provision of support outwith the hospital environment for patients and their families.

And the work of Dr Davidson and her team was judged worthy of the award for Services to Women and Children this year’s Scottish Heath Awards.

No one knows better than Laura Young, 47, from East Lothian, how much the team deserve the award.

Laura’s daughter, Verity, died in 2009, aged just eight years old, from both systemic lupus erythematosus and cancer.

Laura said: “The amenities available at the different outpatient departments when attending appointments for Verity were very different.”

She said the facilities at the children’s cancer ward were ‘first class’ but at the rheumatology outpatients department there was little to distract the children.

Play therapists were either not funded or only worked part-time which did not necessarily tie in with every patient’s appointment. The result was that children were anxious and stressed while waiting on their outpatient treatment.

The Paediatric Rheumatology team recognised that there were fewer charities associated with Lupus, Juvenile Idiopathic Arthritis (JIA) and other related conditions in children and went about driving forward improvements.

After Verity died Laura set up the Teapo Trust in her memory.

And, with the support of Dr Davidson and the team, Laura has gone on to provide a comprehensive art therapy programme for patients at six different hospitals around Scotland to reduce anxiety in children while awaiting their appointment.

Dr Davidson is also Patron of the Scottish Network for Arthritis in Children (SNAC).

Laura said: "The team has done so much to improve the patient experience by working with our charity and several others.

'They give so much of their own time freely outside of just the hospital environment.

'The Scottish Network for Arthritis in Children (SNAC) provides weekends away for new patients, and doctors, like Joyce, go on them to offer advice.'