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## Background

Welfare technology is considered to be cost effective, promoting consistent quality in health care (1, 2), including the care pathways for individuals with Chronic Obstructive Pulmonary Disease (COPD). Welfare technology has been found to ensure more freedom and responsibility for ones own illness leading to prevention of hospitalizations (3, 4). Technologies therefore are assumed to enhance the quality and consistency of treatment programs for patients with COPD. Prior to implementation of welfare technology in the Region of Zealand, Denmark, University College Zealand and COPD Competence Center, Hospital Naestved currently investigate how patients with COPD and health professionals across sectors experience the use of different technologies with regard to their competencies and enhancement of quality in their work with the patients.

## Aims

In order to enhance the quality and consistency of treatment programs for patients with COPD this project seeks to explore:

- Experiences among patients with COPD and health professionals of implementation of technology regarding *own competences* for using the technologies as well as its *impact on the quality of care*.



## Method

The study is a phenomenological explorative study. Data were collected in spring 2014. The analysis process is expected to be finished in fall 2014.

All participants (16 health professionals and 16 patients with COPD) were recruited by The COPD Competence Center.

Two focus group interviews with in total 16 health professionals (8 in each group) and individual semi structured interviews with patients were conducted after the testing of technologies. The overall themes for all interviews were concentrating on capturing experiences of the testing of the technologies. The types of technologies were;

- 1) Brochures about living with COPD, 2) telephone consultation with a nurse from COPD Competence Center and 3) interactive website with health profile for COPD [www.helbredsprofilen.dk](http://www.helbredsprofilen.dk)

The analysis follows the four steps as described by Malterud (5)

## Preliminary results

In general the patients stressed that they prefer the knowledge is given by health professionals whom they have feel safe with and related to. Some expressed that they did not feel familiar with technology and therefore do not expect to use it in their daily life.

Others felt that the new experiences with technological aid would make them feel more secure in daily life, as one expressed *“what gives me knowledge, give me security“*. Thus from the raw data it seems that the patients with COPD find the knowledge will impact quality in the care pathways and daily life, but it is individual how they prefer to have it. The health professionals generally pointed out the brochures as especially good, one expressed *“The brochures are really good, that’s for sure. I use it in my work with our patients, “and” it was a very good knowledge boost “*. They were as well very satisfied about the telephone consultation, *“Telephone consultation with a single patient case, which was a bit difficult (...)I got really good help.”*

The healthcare professionals who had used [www.helbredsprofilen.dk](http://www.helbredsprofilen.dk) found it very informative and useful, both for them selves as professionals, but also for the patients with COPD. They found that it provide something, that the other technologies don´t, *“It has been good to be in the Interactive website with health profile for COPD because there is little movie where you can watch... It provides something different and there are both doctors, social workers and nurses who take up the issues and then there are short films”*. Thus there is a great potential in the website with health profile for COPD by being interactive and for using the videos.

The health professionals stressed that the selected technologies by individual approach would impact quality in the care pathways, daily life and on the quality of care of patients with COPD. Also the health professionals felt they were competent in using the technologies, but need devoted time and educational training for implementing it in the care and treatment of patients with COPD.

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