8.10 HSE-Change-Guide to Spark funding: Accessing digital CBT to improve Breathlessness and Anxiety in COPD Patients

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Background: Valuable knowledge was gained participating in change-experiential-programme which included the HSE-Change-guide, Community-Of-Practice, quality improvement learning and reflective practice. The journey of applying this knowledge &skills in clinical practice arose while attending the ERS in Milan, seeing a digital-interactive-course-CBT which would benefit COPD patients with symptoms of breathlessness and anxiety. A journey of an integrated Community-Of-Practice, getting Spark-funding, designing a study to evaluate the impact of this digital-CBT access. Methodology: Embracing HSE-Change-Guide: People-&-Culture: Shared information with Respiratoryteam. SPARK-Fusion-funding required collaboration with organisations outside of HSE. Partners; Mayo-Sports-Partnership, Sláintecare-Healthy-Communities-and-Integrated-Development, Self-Management-Co-Coordinator, Mayo-Library-HQ &ALONE. People's-Needs- Defining-Change: Community-Of-Practice common purpose of well-being; Accessing digital CBT to reduce symptom burden. **Define:** Outlined project roles and expectations. Successful SPARK-funding. Design: Patient Journey-Map, and Ouasi-RTC. **Deliver:** Roll-out July2024. Ethical approval. **Results:** As a direct result of completing the HSE-Change-Guide plus exposure to Community-Of-Practice in action, a digital solution will be trialled to reduce a burden of COPD symptoms of breathlessness and anxiety, a problem experienced in each Respiratory Integrated Care Chronic Disease HUB. Conclusion: Promoting the HSE-Change-Guide plus exposure to Communities-of-Practice in action it gives confidence to frontline staff to pursue and access solutions to problem-solve, therefore benefiting patients and by association integrated/acute/ community care. Conflict of Interest: The authors declare that they have no conflict of interest.