

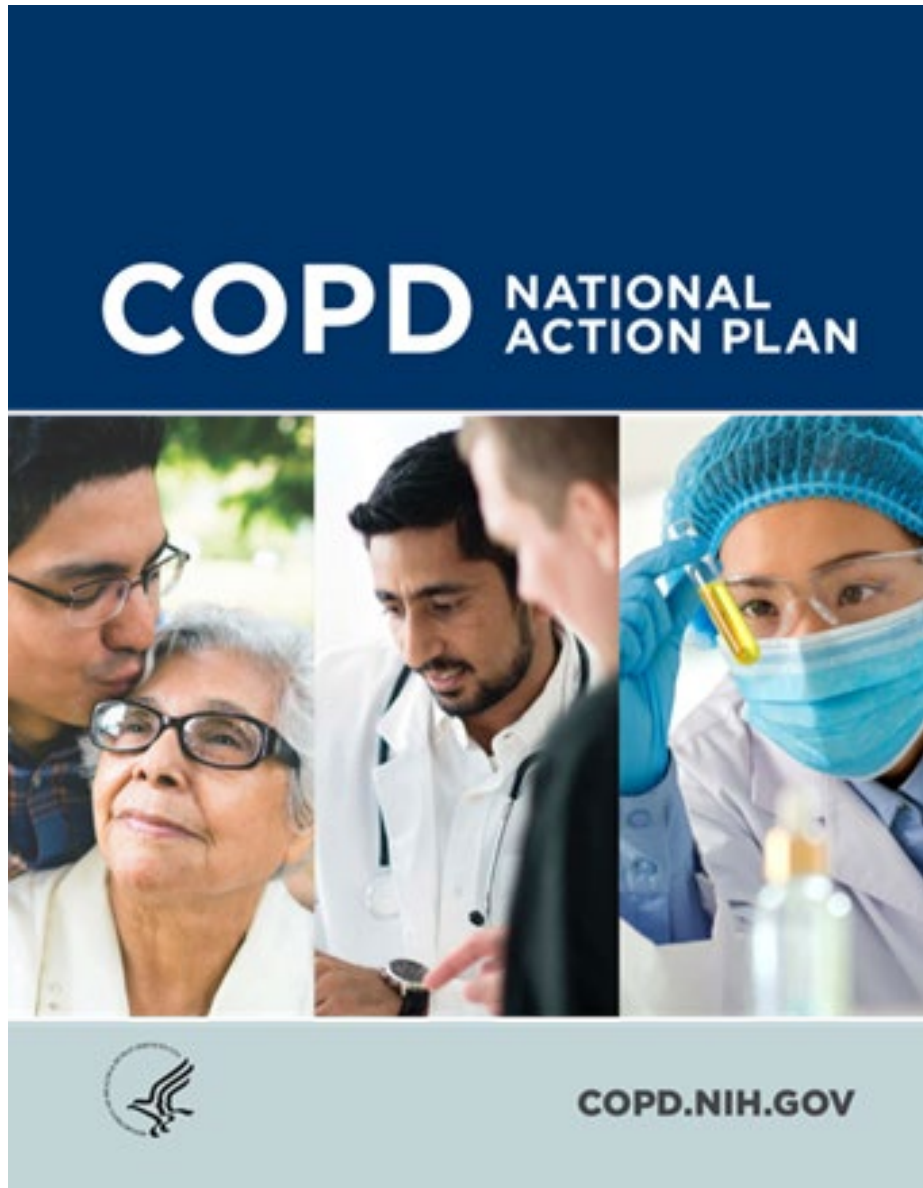
# COPD National Action Plan Highlights: Provider Opportunities

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# 5 Goals of the COPD National Action Plan\*

Goal 1	EMPOWER people with COPD, their families, and caregivers to recognize and reduce the burden of COPD.
Goal 2	Improve the prevention, diagnosis, treatment, and management of COPD by improving the quality of care delivered across the health care continuum.
Goal 3	Collect, analyze, report, and disseminate COPD-related public health data that drive change and track progress.
Goal 4	Increase and sustain research to better understand the prevention. Pathogenesis, diagnosis, treatment, and management of COPD.
Goal 5	Translate national policy, educational, and program recommendations into research and public health care actions.



# Goal One: Empower People with COPD, Their Families, and Caregivers to Recognize and Reduce the Burden of COPD

- Increase public awareness of the risk factors and symptoms of COPD so that earlier diagnosis of symptomatic individuals becomes the norm.
- Increase the effectiveness and variety of outreach communication campaigns and activities that utilize evidence-based approaches to raise awareness of COPD, particularly those at high risk, and help people diagnosed with COPD manage the disease.
- Expand opportunities to increase COPD awareness across the public-private spectrum.





# Goal One: Provider Opportunities for Patient Participation and Engagement

Share culturally and linguistically appropriate COPD risk assessment tools and educational materials with people with COPD and their families, friends, colleagues, and community members

Work locally with stakeholders, partners, and communities disproportionately affected by COPD to support disease awareness.

Organize and support local events and activities at hospitals during community events and activities, and as part of workplace wellness programs; seek local earned media coverage; and utilize existing health observances including World COPD Day and National COPD Awareness Month.



Develop and execute train-the-trainer programs and distribute educational materials at state and federal levels that have unified messages and calls to action.

Identify and engage new partners who can address COPD, particularly those with the ability to reach populations most affected by the disease, as well as those working on policies aimed at tobacco-use prevention.



## Goal Two: Improve the prevention, diagnosis, treatment, and management of COPD by improving the quality of care delivered across the health care continuum

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- Develop, disseminate, and maintain unified, multidisciplinary and patient-centric national guidelines for COPD that are accessible and easy to follow
- Develop a unified, multidisciplinary educational curriculum for health care professionals, including primary health care providers, using harmonized clinical practice guidelines
- Develop, in accordance with clinical quality measures, a clinical decision tree and other tools to enable high-quality care for people with COPD.
- Develop and encourage the use of a written, patient-centric COPD management plan tool, with appropriate cultural and health literacy considerations, which can be customized with input from the patient's health care provider(s).
- Improve access to care for people with COPD, particularly for those in hard-to-reach areas



# Goal Two: Provider Opportunities for Patient Engagement and Participation



Promote COPD assessment and treatment guidelines to healthcare professionals.



Incorporate COPD detection, care, and treatment recommendations into clinical settings.



Identify opportunities to increase health care professionals' awareness and use of existing COPD training, tools and model programs.



Develop and offer culturally/linguistically appropriate resources, referrals and support services to further education.

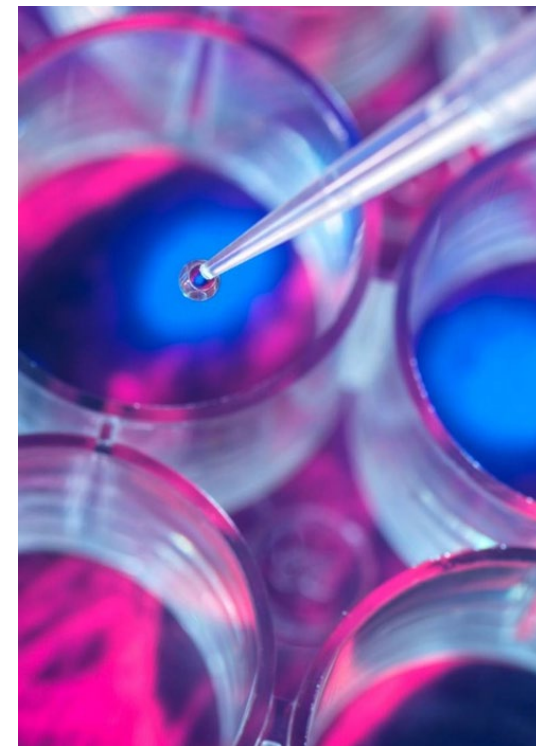


Use medical reminders for COPD risk detection during visits.



## **Goal Three: Collect, analyze, report, and disseminate COPD-related public health data that drive change and track progress.**

- Enhance and optimize our capacity to collect and aggregate data from multiple sources, including at local, regional, and national levels, and turn them into actionable information.
- Develop standardized data collection methods using definitions and core indicators to monitor the prevalence, care, and treatment of people with COPD, including AAT deficiency induced.
- Improve accessibility of EHRs/PHRs, claims data, pharmacy-benefit data, patient reported outcomes data, and other electronic data for use in COPD surveillance and measurement efforts.
- Facilitate dissemination of data and analyses.





# Goal Three: Provider Opportunities of Patient Engagement and Participation

Report prevalence of COPD in accordance with the requirements of public health and healthcare organizations.

Work with public health authorities to improve the thoroughness and quality of COPD surveillance data.

Use EHR/PHR technology to assess and evaluate the capacity to monitor and control COPD and related services.

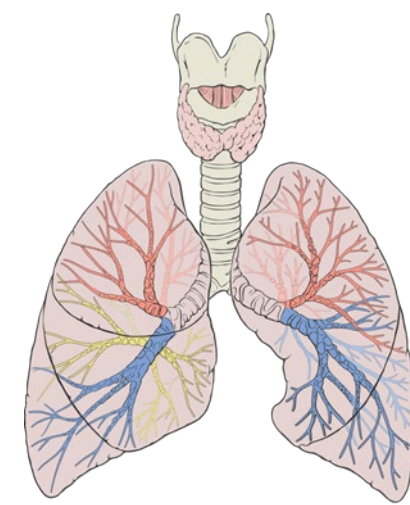
Collect detailed info about population-specific health disparities in COPD prevention, diagnosis, care, and treatment.

Promote research that tracks the prevalence and incidence of COPD, including its phenotypes.

Create or continue to build existing registries that help evaluate and improve patient management, clinical care and treatment.

Support surveillance projects and epidemiological investigations to help understand the characteristics and needs of people at risk for and living with COPD.

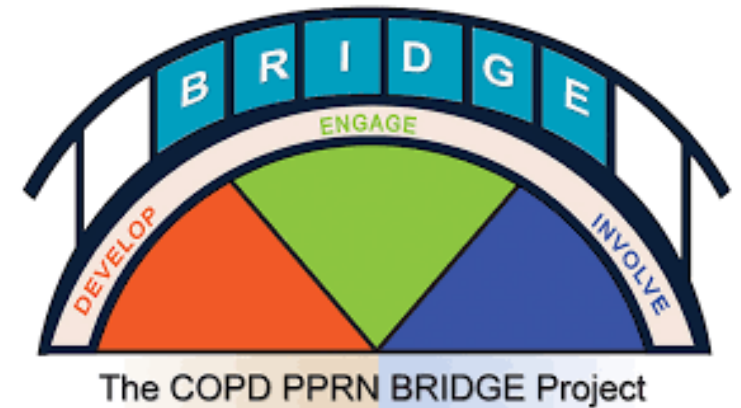
Create a common portal database and make its use publicly accessible to evaluate and enable predictive modeling





# **Goal Four: Increase and sustain research to better understand the prevention, pathogenesis, diagnosis, treatment/management of COPD.**

- **Help expand, coordinate, and optimize COPD research.**
- **Improve methods for earliest detection and diagnosis and develop effective strategies for preventing the onset and progression of COPD.**
- **Define and characterize the pathogenesis of COPD heterogeneity.**
- **Develop personalized medicine for COPD based on the pathogenesis and clinical heterogeneity.**
- **Promote research that can lead to strategies that help prevent the onset and progression of COPD and improve the quality of COPD care and management.**



# Goal Four: Provider Opportunities for Patient Engagement and Participation

*Invest in, facilitate, and promote* basic, clinical, and applied *research* to improve the diagnosis and treatment of people with COPD; assess the impact of the home environment on patient management and treatment

*Create* COPD *patient registries* that help evaluate and improve patient management clinical care and treatment.

*Invest in, facilitate, and promote development*, regulatory review and approval, and use of new technologies to improve the COPD care continuum.

*Investigate* the biological effects of nicotine and its delivery devices and products to better understand emerging threats to lung health that may modify the onset or progression of COPD.

*Promote inclusion* of info relevant to COPD in programs for training medical professionals and the next generation of biomedical scientists.

*Identify risk factors/targets* for preventative interventions for chronic lung disease using ongoing NHLBI-supported studies. Test the feasibility of strategies for the prevention of COPD and demonstrate proof of principle in early phase clinical studies.

*Leverage NHLBI-funded programs* such as LungMap, to develop novel approaches for cell-based therapies and lung regeneration that could be applied in late-stage emphysema.

*Leverage observational cohorts*, such as NHLBI-supported COPDgene and SPIROMICS studies to identify subgroups of patients with COPD in which molecular pathways/pathophysiological mechanisms are critical in pathogenesis. Develop and test panels of biomarkers that can be used to identify individual patients within these subgroups

*Conduct clinical trials* for COPD that designed to allow analysis of efficacy in predefined subgroups of subjects, providing an evidence base for precision medicine. This applies to trials of drugs that target particular molecular pathways and to trials of other interventions such as pulmonary rehabilitation.

*Design and test novel approaches* for better implementation of effective strategies for the case finding, diagnosis, and treatment of COPD in the community, home, and primary medical care environments.

*Investigate the prevalence/incidence* of COPD in nonsmokers to compare/contrast them and their responsiveness to currently available therapeutics to patients with smoke-induced COPD.

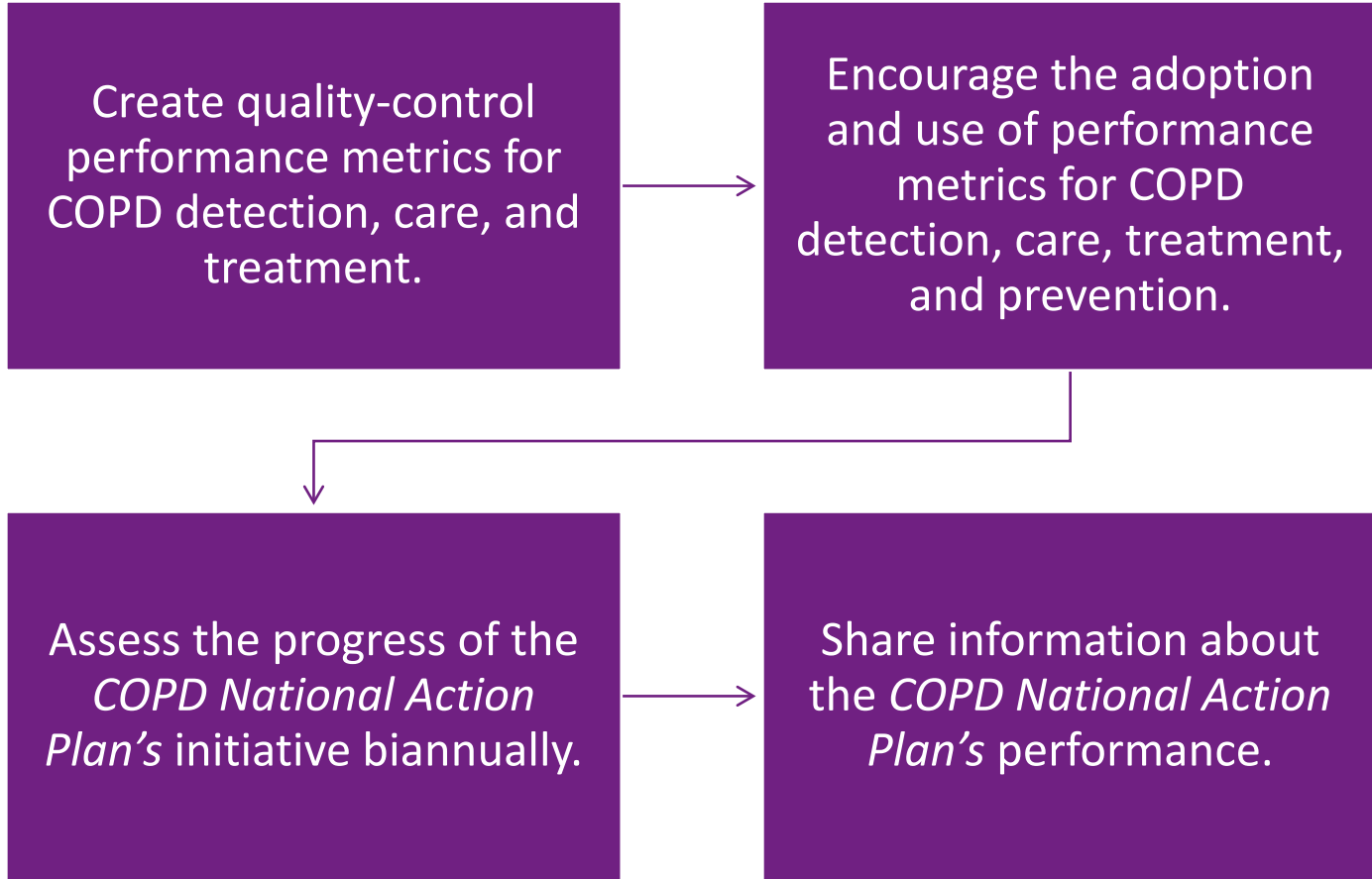
# **Goal Five: Translate national policy, educational, and program recommendations into research and public health care actions**

- Put into action prevention strategies that are proven effective in addressing the 80% of COPD deaths due to smoking.
- Create a collaborative official entity that implements, prioritizes, and tracks activities in accordance with the *COPD National Action Plan's* goals and objectives.
- Identify and publicize funding opportunities that advance the implementation of the *COPD National Action Plan*.
- Develop and implement COPD quality measures into national care delivery.
- Strengthen the public health infrastructure for addressing COPD.





# Goal Five: Provider Opportunities for Patient Engagement and Participation



# References

- All Information obtained from COPD National Action Plan @COPD.NIH.GOV
- <https://www.nhlbi.nih.gov/health-topics/education-and-awareness/COPD-national-action-plan>