

MEETING THE HOLISTIC NEEDS OF PATIENTS SUFFERING FROM SLEEP APNEA – PATIENT ENGAGEMENT AND CO-PRODUCTION AS PART OF DEVELOPING A PATIENT-EDUCATION PROGRAM (#5945)

Topic

AS04 SUB-THEME 04: Improving the quality and safety of healthcare delivery

Authors

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Abstract Body

Introduction: Obstructive sleep apnea (OSA) is a chronic condition which long-term prognosis is dependent on good health-related information and long-term motivation. Currently there is a lack of evaluated educational programs targeted OSA patients, which support long-term motivation. Aim: The aim was to develop and evaluate the feasibility of a patient education for patients´ with OSA, in a hospital setting. Methods: The course development was inspired by an action research approach and based on 4 focus group interviews with 31 patients suffering from OSA. The focal point for each interview, was OSA patients´ motivation and needs in everyday life. A co-production group was established consisting of five OSA patients, two researchers, a sleep physician and a nurse with in-depth knowledge of OSA. Based on results from the interviews and continuous learning, the group planned an overall educational program – carried out through three courses. Results: 22 patients participated in the three courses. Each course consisted of two sessions. The first session focused on disease- and treatment specific knowledge. The second session focused on experience-sharing and supporting patient-empowerment. The courses were based on different teaching approaches – respectively; teacher-led teaching, reflective spaces, and virtual teaching. The evaluation consisted of surveys and interviews. Conclusion: All participants showed great satisfaction with the overall program. Especially the opportunity of experience sharing combined with knowledge from health-professionals was highlighted. However, more knowledge about form and content is needed, and in order to keep focus on long term-motivation the healthcare staff needs further competences regarding user-involving methods.