



New Hampshire COPD Plan

Addressing Chronic
Obstructive Pulmonary
Disease (COPD)
in New Hampshire:

- ✓ Preventing COPD
- ✓ Improving Health Outcomes for NH Residents
- ✓ Reducing Burden



 **Breathe**[®]
NEW HAMPSHIRE
Improving lung health since 1916

November 2014

November 2014

Dear Friends,

Breathe New Hampshire is pleased to have convened a diverse group of stakeholders from throughout our state to produce this New Hampshire COPD Plan. This “roadmap” is the first for New Hampshire and is intended to help prevent and bring more attention and resources to Chronic Obstructive Pulmonary Disease (COPD).

Several years ago, the National Heart, Lung and Blood Institute initiated the *COPD Learn More Breathe Better*® Campaign with three main goals:

- Increase awareness of COPD as a serious lung disease - the 3rd leading cause of death in the United States.
- Increase understanding that COPD is treatable.
- Encourage people at risk to get a simple breathing test and talk to their doctor or health care providers about treatment options.

Since that initiative began, Breathe New Hampshire, as a member of the national Breathe Better Network, has been working hard to advance those goals in our state. Now, with the release of this plan, we are taking the next major step forward as New Hampshire did not have a COPD plan, nor is there a national plan. So we thought it important, given our mission and long history in this state, to initiate and coordinate a plan for New Hampshire.

The scale and complexity of COPD requires the coordination and commitment from a diverse group of stakeholders working together to implement and continue refining the recommendations in this New Hampshire COPD Plan. Ultimately, our goal is to reduce the burden of COPD and improve lung health. That translates into a healthier state and better quality of life for everyone.

We thank our supporters who helped to fund this initiative and for the work of our volunteers who devoted a great deal of time to help develop this plan.

For more information, please call us at (603) 669-2411 or email at info@breathenh.org. We look forward to working with you to move this plan forward!

Sincerely,



Daniel Fortin
President & CEO

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We would also like to thank all the individual donors who made generous contributions in support of our COPD initiatives.

Finally, we are greatly indebted to the Advisory Group and Work Group members for their time and effort in providing their expertise in developing the recommendations for the New Hampshire COPD Plan.



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Executive Summary

Chronic Obstructive Pulmonary Disease (COPD) is the third leading cause of death in the U.S. It is estimated that 15 million have been diagnosed with COPD and another 15 million may be undiagnosed. In 2011, the Centers for Disease Control and Prevention (CDC) published a report with the purpose of providing a framework to address COPD as an important public health issue. There is no national COPD plan; however, various states have developed plans to address the state's unique needs in addressing COPD.

Breathe NH has been leading efforts for many years to reduce the public health impact of COPD in New Hampshire and saw the need to develop a state-specific plan to guide and align COPD prevention and management efforts. While preventing tobacco use is a priority in the NH State Health Improvement Plan 2013-2020 developed by the NH Department of Health and Human Services, and in the Coordinated Strategic Plan for Chronic Disease Prevention and Health Promotion developed by the NH Division of Public Health Services, there is no COPD plan for New Hampshire. Because tobacco is the leading cause of COPD, this NH COPD Plan will bring more attention and resources to existing statewide efforts to reduce death, disease, and disability caused by tobacco use.

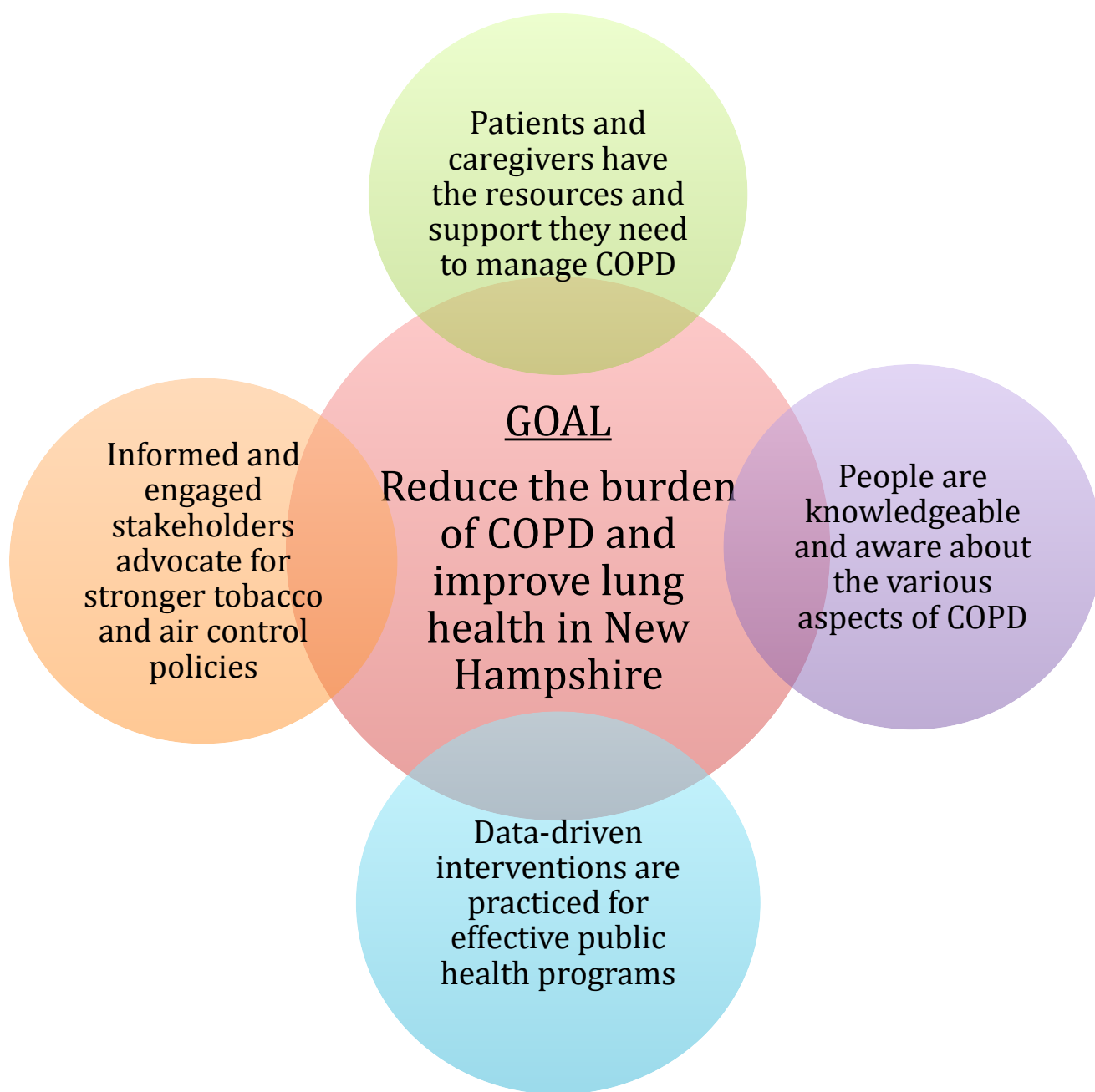
The purpose of this NH COPD Plan is to create and implement a sustainable, comprehensive, and coordinated course of action to bring more attention and resources to COPD in NH.

The goal is to reduce the burden of COPD and improve lung health in NH.

The plan outlines goals, objectives, and action steps to help build capacity in NH to:

1. Prevent COPD through community mobilization and advocacy and aligned policy efforts.
2. Raise COPD awareness, especially among those most at risk.
3. Support primary care providers to ensure everyone at risk is properly diagnosed and all those with COPD receive consistent and optimal care.
4. Improve COPD data collection and encourage effective use of the data to design effective and targeted interventions.
5. Support those affected so they can face the disease with courage, confidence, and hope.

This NH COPD Plan is a fluid document that will change over time to reflect new and emerging needs of the state. Breathe NH will work with partners to secure resources, help coordinate efforts, and update the plan, as need arises, to reflect new data or opportunities. The initial planning phase was completed between February and November 2014. The next phase will be implementing the action steps as recommended in the plan and working with partners to monitor priorities and coordinate action. We hope the NH COPD Plan will galvanize participation and responsibility on the part of diverse stakeholders to more effectively address COPD in NH. As a guidance document for action, we anticipate that this plan will successfully reduce the burden of COPD in NH.



Summary of Goals, Objectives, and Action Steps

GOALS

ADVOCACY AND PUBLIC POLICY:

Encourage advocacy and public policy efforts to reduce the burden of COPD in NH.

OBJECTIVES

1. Improve capacity of COPD stakeholders to act as advocates.
2. Support workplace policies and programs that reduce risk of COPD.

ACTION STEPS

- Provide ongoing advocacy trainings
- Organize annual COPD Awareness Day
- Create a survey to establish baseline for assessing current tobacco and COPD policies
- Identify various types of workplaces to conduct survey, establish contact, and work with them to develop and implement COPD-related programs

PUBLIC AWARENESS AND EDUCATION:

Increase awareness and understanding of COPD in NH.

1. Initiate a coordinated COPD awareness campaign for NH.
2. Initiate a statewide network of COPD stakeholders.

- Compile COPD Awareness Toolkit
- Promote www.breathenh.org as a central hub for COPD resources
- Identify and partner with community-based groups
- Bring together and expand stakeholders
- Coordinate annual meeting of network members
- Identify resources to coordinate and sustain the network

COPD DIAGNOSIS, MANAGEMENT & PATIENT/FAMILY SUPPORT:

Improve sense of well-being for NH residents with COPD through correct diagnosis, access to appropriate treatment, and patient/family resources and support.

1. Promote use of ACP Guidelines.
2. Increase access to resources and support services for COPD patients and their caregivers.

- Develop and disseminate a simple 1-page guideline tool
- Explore ways to integrate and promote tool into medical provider offices and systems
- Work with patient groups and Breathe NH's Lung Health Team members to identify and promote opportunities for patients and caregivers
- Assess the availability and use of COPD Action Plans

DATA SURVEILLANCE AND EVALUATION:

Improve collection, analysis, and reporting of timely COPD-related data in NH to guide public health action and target resources.

1. Leverage existing data collection tools and resources in NH to monitor COPD.
2. Maximize use and dissemination of COPD-related data throughout the state.

- Identify existing sources of data that can "paint the picture" of COPD in NH
- Identify gaps in current data and leverage resources for ongoing data collection
- Identify stakeholders using COPD-related data
- Explore opportunities to use readily available NH data
- Create and disseminate a simple report

Plan Description and Background

The NH COPD Plan is a roadmap that will outline a multidisciplinary and coordinated approach to improve the lives of those impacted by COPD and reduce the burden of the disease in our state. We anticipate the plan will be a guide for COPD prevention, diagnostic, and management efforts and will encourage coordinated action. Our primary guiding principles during the planning process were to keep it simple, focus on feasible action steps, and align existing resources. While time and resources are limited, there is a sense of urgency among the stakeholders to move this plan forward. We hope that the plan can honor and promote local successes and stories.

In 2010, Breathe New Hampshire (Breathe NH) convened nearly 50 stakeholders to collect information and recommendations to guide the development of a state-specific COPD plan. Based on the results of these meetings and the growing urgency to address COPD in NH, Breathe NH initiated a NH COPD action planning process in the fall of 2013. In February 2014, Breathe NH worked with four workgroups to identify objectives and specific action steps needed to address the core components in a state plan. Workgroup members brought on-the-ground reality and diverse perspectives, and the workgroup chairpersons kept members on task. Between February and June 2014, each workgroup generated and refined recommendations for their sections of the NH COPD Plan. An advisory group — including COPD patients, doctors, and public health experts — provided oversight and technical expertise.

The NH COPD Plan has four sections of recommendations corresponding to the four workgroups:

1. *Advocacy and Public Policy*
2. *Public Awareness and Education*
3. *COPD Diagnosis, Management, and Patient/Family Support*
4. *Data Surveillance and Evaluation*

Breathe NH staff worked with workgroup chairs and advisory group members to finalize the plan for its release in November 2014 during COPD Awareness Month. We hope the NH COPD Plan is a springboard for future action, and we look forward to being an active partner as we work with many others to implement the recommendations and monitor and refine the plan as needed.

Who are the COPD stakeholders?

We broadly define stakeholders for this plan as anyone (organization or individual) impacted by COPD. Potential stakeholders include, but are not limited to, COPD patients and their family members and caregivers, medical providers, researchers, local and state government, community members, employers, schools and colleges, policymakers, insurers, pharmaceutical companies, and legislators.

Why does New Hampshire need a COPD plan?

As the third leading cause of death and second leading cause of disability in the United States, COPD places a tremendous burden on individuals, their families, and society. Approximately 1 in 15 New

Hampshire adults has COPD and the disease disproportionately affects those with lower income and education levels, women, and those 65 years and older. While COPD awareness has grown in recent years, thanks in part to the National Heart, Lung and Blood Institute's *COPD Learn More Breathe Better*[™] campaign launched in 2007, awareness pales compared to other leading killers. While a national COPD plan has yet to be developed, the Centers for Disease Control and Prevention (CDC) recommend that states develop their own plan to address and better manage COPD. Initiating a statewide effort to create a NH-specific COPD plan was a logical next step for Breathe NH to continue the work it has led to date.

The NH COPD Plan outlines steps aimed to reduce the burden of COPD in NH and provides a sense of optimism to those affected by the condition. Collectively, we want to ensure that:

1. We work together to prevent future cases of COPD.
2. All those at risk for developing COPD get diagnosed early and correctly.
3. All individuals living with COPD have access to optimal care.
4. Family members and caregivers have information, resources, and confidence to support loved ones living with COPD.
5. New Hampshire takes COPD seriously.

Voices of those who helped to create the NH COPD Plan



Though I am not cured and have a long way to go, with exercise and healthier living there is hope for a brighter future.

Larry Reid, living with COPD

I have been honored to have witnessed and shared with so many good folks their struggle with lung disease. These very special people deserve a voice. I want them to be heard.



Deb Chabot, RN, BS, AE-C



Since COPD is the third leading cause of death in this country, I felt, as a respiratory therapist, this was a wonderful opportunity to participate in increasing awareness at the community level.

Anne Duszny RRT, NPS, AEC

Early on I made a commitment to do everything I could to help those with COPD have a better quality of life, to maximize their level of functioning as well as help them to have fun doing it.



Essy Moverman, RRT, RCP, AE-C, TTS



NH's COPD Plan is the perfect example of affecting the patient population with what they need: enabling them to live and enjoy life "like a normal human being."

Albee Budnitz, MD, FACP, FCCP

The NH Plan aims to prevent COPD as well as to improve the lives of those with COPD in our state.



Donald A. Mahler, MD

COPD Overview

In 2010, the U.S. spent \$49.9 billion on COPD-related healthcare costs (\$29.5 billion on direct healthcare expenditures and \$20.4 billion on indirect costs).¹

COPD is the third leading cause of death in the US.² An estimated 15 million Americans have been diagnosed with the disease and more than 50 percent of adults living with low pulmonary function are unaware that they have it.^{3,4}

Causes

- Inhaling tobacco smoke
- Inhaling air pollutants, chemical fumes, or dust at home or in the workplace
- Genetic deficiency of alpha-1 antitrypsin

Diagnosis

A simple breathing test called spirometry is used to measure lung function and confirm diagnosis.

Symptoms

- Chronic cough
- Chronic sputum (phlegm)
- Shortness of breath while doing daily activities
- Unable to take a deep breath

Prevention

The most effective way to prevent COPD is to never start smoking or to quit. Reducing or eliminating exposure to tobacco smoke and home and workplace air pollutants and avoiding respiratory infections are also essential strategies in preventing the development of COPD.

Goals of Effective COPD Management

1. Relieving symptoms
2. Slowing the progress of the disease
3. Improving exercise tolerance and ability to stay active and perform daily activities
4. Preventing and treating complications and flare-ups
5. Improving overall health

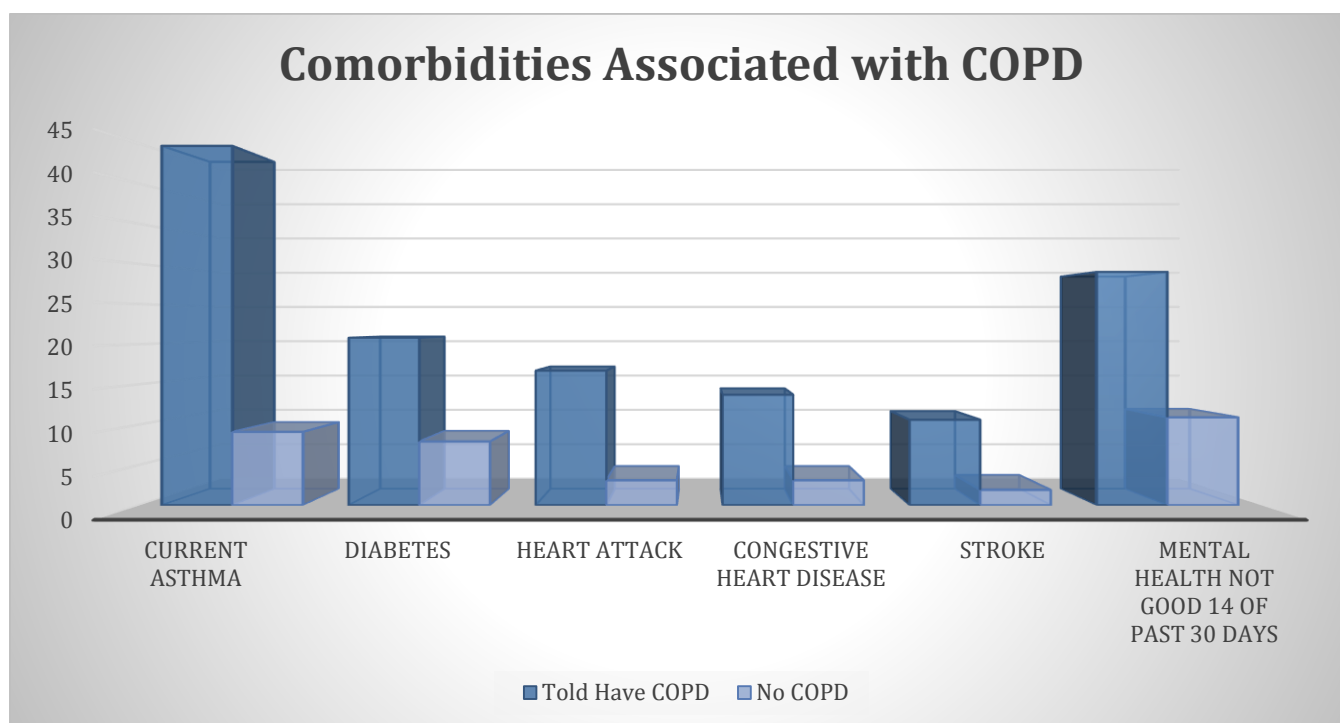
COPD in New Hampshire

Approximately 1 in 15 New Hampshire adults, or 6.5%, reports having COPD. COPD prevalence increases with age, from 3.9 percent among those aged 18–34 years to 11.7 percent among those aged 65 years and older. Women are more likely than men to report COPD (7.4% compared with 5.5%).

Employment status is also related to a COPD diagnosis, with prevalence highest among those who are unable to work (30.1%). COPD prevalence declines as educational level increases. Those who do not graduate from high school report a higher prevalence of COPD (17.6%) than those with a high school diploma (6.8%) or a college degree (2.7%). COPD prevalence also decreases with increasing household income. Among those with COPD, 42.2% are current smokers.⁵

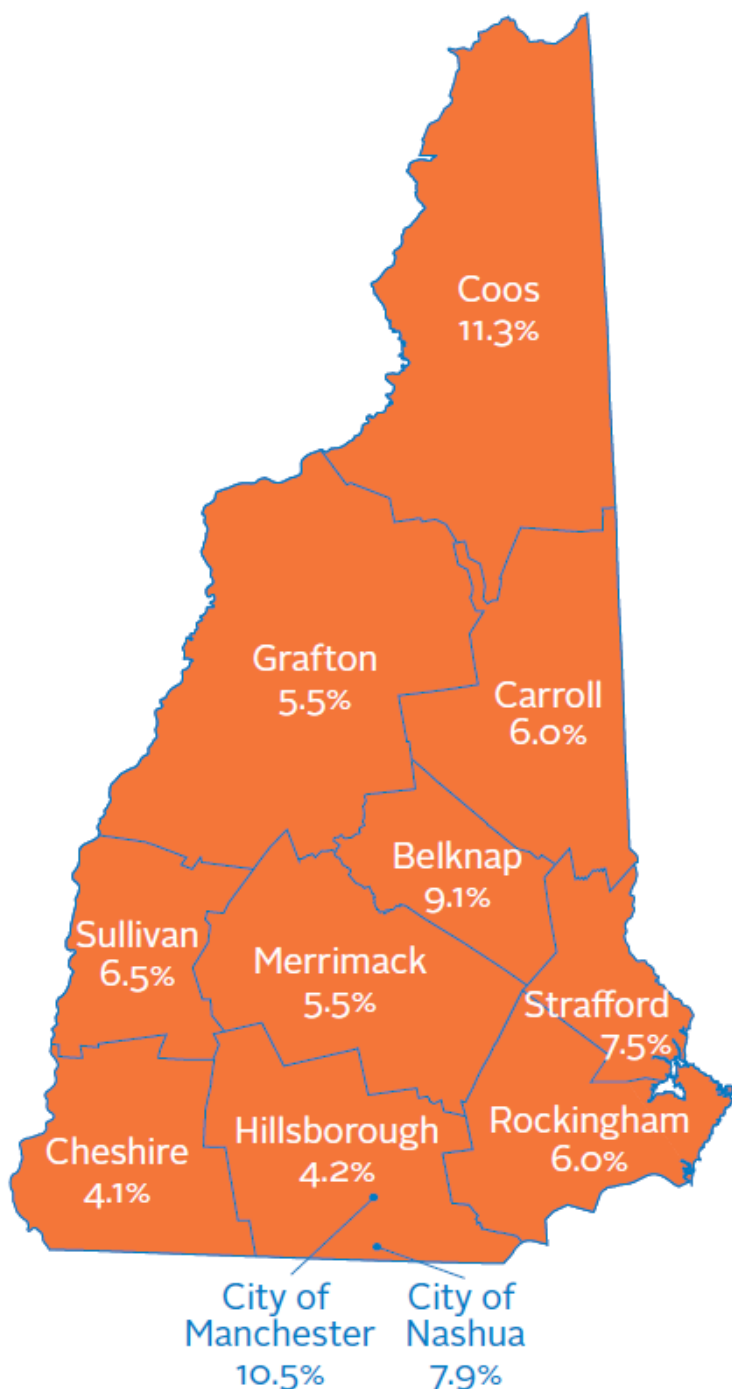
Impact of COPD on Quality of Life

Many people living with COPD find it difficult to perform simple daily tasks such as walking, bathing, and dressing; thus, their quality of life is greatly impacted. For persons with COPD, keeping active can be challenging because breathing takes much more energy and effort than normal. Among those with COPD, 58.9% report having fair or poor general health, 44.2% report physical health that is not good 14 or more of the past 30 days, and 66.0% report limitations on their activities.⁵



Source: 2011 NH BRFSS data weighted by HSDM ⁵

There is also wide variation in COPD prevalence within New Hampshire, ranging from 4.1% in Cheshire County to 11.3% in Coos County.⁵



Some of the factors responsible for these differences could be related to tobacco use, exposure to occupational and home pollutants, diagnostic practices, or access to healthcare. Further research is needed to determine the cause for this geographical variation in order to tailor specific interventions accordingly.

For more information about COPD in NH, please refer to Breathe NH's 2014 COPD Issue Brief.⁶

Source: 2011 NH BRFSS data weighted by HSDM⁵

Work Group Recommendations

Advocacy and Public Policy

GOAL: Encourage advocacy and public policy efforts to reduce the burden of COPD in New Hampshire

Rationale: COPD creates a significant burden in NH, both in direct and indirect costs as well as in quality of life for those directly impacted by the disease. To alleviate the health and financial impact of COPD in NH, it is important that stakeholders are armed with information and skills necessary to influence policies and make positive changes. Advocating for evidence-based policies can support the prevention of COPD, as well as improve access to the best treatment and management for those living with the disease.

Objective 1: Improve capacity of COPD stakeholders to actively engage in advocacy and policy-level changes related to COPD prevention and its effective management.

Actions Steps:

1. Provide ongoing advocacy trainings (in-person and online) and resources to motivate and engage more COPD stakeholders in policy change.
2. Organize an annual COPD Awareness Day for legislators and stakeholders to provide an opportunity for stakeholders to interact and share stories with elected officials in an effort to educate them and identify solutions and resources.

Potential Partners: Community action programs, COPD Foundation, NH Medical Society, health care provider professional organizations, respiratory therapists/programs, pulmonary rehabilitation programs, hospitals, Foundation for Healthy Communities, public health departments and networks, community and statewide advocacy groups, patient support groups, Tobacco Free NH Network, NH legislators

Measures:

1. Number of trainings conducted statewide and stakeholders trained
2. Tool integrated in the trainings to measure a change in the skills and capacity of stakeholders to advocate over time

Objective 2: Support workplace policies and programs that reduce the risk of COPD and promote effective disease management.

Action Steps:

1. Create a survey to establish baseline for assessing current tobacco prevention and COPD-related policy efforts.
2. Identify workplaces to conduct the survey and work with them, as needed, to develop and implement COPD-related workplace programs and policies (e.g., smoke-free policies, insurance coverage for evidence-based tobacco-use cessation treatment, indoor air quality policies).

Potential Partners: Businesses and worksite wellness coordinators, Chambers of Commerce, Business and Industry Association, health insurance companies and brokers, community action programs, Foundation for Healthy Communities, pharmaceutical companies, Keene Healthy Community Initiative, Environmental Protection Agency (EPA), Occupational Safety and Health Administration (OSHA)

Measures:

1. Survey created and administered
2. Various workplace locations identified, especially those likely to have impact on target populations
3. Increase in COPD prevention and management worksite policies at local and state level over time

Public Awareness and Education

GOAL: Increase awareness and understanding of COPD in NH

Rationale: Given that COPD is the third leading cause of death in the United States and affects about 1 in 15 New Hampshire adults, it is surprising how little the general public knows about the disease. In a 2008 nationwide survey of 8,200 adults, only 64% of respondents had ever heard of COPD, and among those, only 44% understood it to be treatable and only 5% recognized chronic cough as a symptom of the disease. Surprisingly, only 22% of the smokers who took the survey recognized that smoking puts them at a greater risk for COPD.⁷ Therefore, focusing efforts on increasing awareness and understanding of COPD will help improve the ability of the public to engage in preventive measures, recognize COPD symptoms, and also enable healthcare providers to diagnose and treat the disease appropriately and effectively. As COPD awareness and understanding improves throughout NH, it will enhance communication among the key stakeholders and provide opportunities for active partnerships.

Objective 1: Initiate a coordinated COPD awareness campaign for NH, leveraging existing resources.

Action Steps:

1. Compile (using existing materials) a COPD Awareness Toolkit that includes the Drive 4 COPD Screener Tool and utilizes stories from NH.
2. Promote www.breatheNH.org as a central hub for all COPD resources and related efforts.
3. Identify and partner with community-based groups that have influence within communities and with people most at risk.

Potential Partners: Media outlets, libraries, pharmacies, senior centers, community action programs, Foundation for Healthy Communities, NH Hospital Association, community health centers, home care agencies, long-term care facilities, hospital community education programs

Measures:

1. Awareness Toolkit compiled
2. Number of toolkits distributed, including electronic and printed
3. Find a tool to measure a change in the awareness level of COPD over time in NH
4. Number and type of partnerships established to reach those most vulnerable

Objective 2: Initiate a statewide network of COPD stakeholders to improve communication, sharing, and learning regarding COPD.

Action Steps:

1. Bring together and expand the number of stakeholders, such as Breathe NH's Lung Health Awareness Team, to build the COPD network.
2. Coordinate an annual meeting of network members to serve as a platform to share best practices and resources, as well as to discuss current issues and identify opportunities for action.
3. Identify resources (funding, partnerships, etc.) to coordinate and sustain the network.

Potential Partners: COPD patients and patient/support groups, pulmonary rehabilitation programs, hospitals and care coordinators, NH Hospital Association, Foundation for Healthy Communities, New Hampshire Pharmacists Association, healthcare providers and centers, Visiting Nurse Association (VNA), Breathe NH Lung Health Awareness Team, New Hampshire Department of Health and Human Services (NHDHHS) chronic disease/tobacco programs

Measures:

1. Network of diverse stakeholders formed
2. Increased resources to support network
3. Explore use of a tool to measure communication between stakeholders

COPD Diagnosis, Management and Patient/Family Support

GOAL: Improve sense of well-being for New Hampshire residents with COPD through correct diagnosis, access to appropriate treatment, and patient/family resources and support

Rationale: Though COPD has no cure, scientific advances and research have provided better treatment and disease management options. It is essential therefore to diagnose and treat COPD patients appropriately by providing a patient-centered, evidence-based approach using current guidelines. Successful COPD management relies, to a great extent, on the commitment of clinicians to follow a standard of care for COPD. It is recommended that all healthcare providers follow ACP (American College of Physicians) Clinical Practice Guidelines to ensure they are diagnosing and treating all COPD patients with the latest clinical information.⁸

Objective 1: Promote use of ACP Guidelines for COPD diagnosis and management among medical providers.

Actions Steps:

1. Develop a simple one-page guideline tool to assist in implementing consistent care.
2. Work with partners to disseminate the tool.
3. Explore ways to integrate and encourage use of the tool in medical provider offices and systems. For example, investigate the use of pay-for-performance as an incentive to comply with the guidelines.

Potential Partners: Hospitals and health systems, Foundation for Healthy Communities, NH Hospital Association, NH Medical Society, oxygen and respiratory equipment companies, Family Practice Residence Program, community health centers, health insurers, pharmaceuticals, managed Medicaid providers, North Country Health Consortium, Foundation for Medical Partners

Measures:

1. One-page guideline tool created
2. Number of partners working to disseminate and integrate the tool
3. Changes in referrals to pulmonary rehabilitation through pre/post survey of pulmonary rehabilitation specialists
4. Decrease in the number of preventable COPD-related re-admissions

Objective 2: Increase access to resources and support services for COPD patients and their caregivers to effectively manage the disease.

Action Steps:

1. Work with patient groups and Breathe NH's Lung Health Team members to identify and promote opportunities for patients and caregivers to interact with and provide education and support to each other (for example, conducting patient-caregiver workshops to promote peer-to-peer learning).

2. Assess the availability and use of COPD action plans by patients and providers. Pilot a NH-specific COPD action plan in at least two hospitals as a first step in developing one standard toolkit for every COPD patient in NH.

Potential Partners: COPD International, pulmonary rehabilitation programs, support groups in NH, provider groups, community action programs, senior centers, care coordinators, COPD Foundation

Measures:

1. Increased resources for patients and caregivers available
2. Number of hospitals using COPD action plans

Data Surveillance and Evaluation

GOAL: Improve collection, analysis, and reporting of timely COPD-related data in New Hampshire to guide public health action and target resources

Rationale: Surveillance is essential to determine the prevalence of COPD in NH, the number of deaths due to the disease, quality of life for those living with COPD, as well as provide information on other related areas, such as hospitalizations, emergency department visits, risk factors, medication use, AND health disparities. Until a few years ago, little data was available on COPD in NH. Due to the high costs associated with collecting original data, efforts have focused on existing data sources, such as surveys and healthcare utilization records.

In 2010 and 2011, questions were included in the Behavioral Risk Factor Surveillance System (BRFSS) conducted by the State of NH to describe the prevalence and characteristics of COPD in the state. However, the information is not sufficient to provide a complete picture of the COPD landscape in NH. Therefore, we need additional COPD-related questions added to the state's BRFSS and to encourage analysis and reporting of the data in order to make informed and effective interventions. This data could serve as a basis for use in public health action by policy makers, educators, health professionals, and other stakeholders to assess whether the efforts and investments are actually improving the status of COPD in NH. Furthermore, we also need to share the data in an effective and timely manner to keep stakeholders informed and engaged.

Objective 1: Leverage existing data collection tools and resources in New Hampshire to monitor COPD and its impact.

Action Steps:

1. Identify existing sources of data that can “paint the picture” of COPD in NH, such as the Behavioral Risk Factor Surveillance System (BRFSS), Medicaid, private insurance data, and hospital discharge data.
2. Identify gaps in current data to promote ongoing data acquisition at the local level and leverage resources to support data collection efforts.

Potential Partners: New Hampshire Department of Health and Human Services (NH DHHS), local public health departments, environmental health tracking program, insurance companies, Medicaid providers, hospitals, accountable care organizations

Measures:

1. Scan of COPD-related data source in the state completed and gaps identified
2. New questions included in BRFSS or other sources to fill needed gaps

Objective 2: Maximize use and dissemination of COPD-related data throughout the state.

Action Steps:

1. Identify stakeholders currently using COPD-related data.
2. Explore opportunities to publish and promote readily available NH data (e.g., BRFSS, University of New Hampshire claims data, hospital re-admission data).
3. Create and disseminate a simple report based on new data analyzed.

Potential Partners: Local and state public health departments, community coalitions, patient advocacy/support groups, NH colleges and universities, hospitals, insurance companies, public health networks.

Measures:

1. Number of stakeholders using COPD-related data
2. Report published and distributed
3. Increase in data-driven COPD programs and interventions across the state

About Us

Breathe NH has been leading statewide efforts for the past decade to bring more attention and resources to COPD. Thanks to a very dedicated and passionate group of volunteers, currently known as the Breathe NH Lung Health Awareness Team, the development of this NH COPD Plan is timely and builds upon various statewide COPD initiatives, which are described briefly below.

Breathe Better Network® Leadership Member

In 2010 and 2011, Breathe NH received awards from the National Heart, Lung, and Blood Institute (NHLBI), a division of the National Institutes of Health, to expand the reach of its *COPD Learn More Breathe Better®* (LMBB®) public awareness campaign. Subcontract funds enabled Breathe NH and its team to bring more attention to COPD through a variety of activities, such as:

1. Produced and distributed NH's first data report on COPD.
2. Produced a COPD insert in the New Hampshire Sunday News on October 17, 2010.
3. Launched a community COPD screening program and partnered to conduct Country Conquers COPD™ community events and COPD screenings. To date, more than 1,275 NH adults have received a free breathing test and thousands have received COPD educational materials and resources through these events.
4. Partnered with radio stations WOKQ (97.5FM) and WPKQ (103.7 FM) to conduct Country Conquers COPD events in the state. Through these events, Breathe NH distributed more than 6,500 COPD educational materials, conducted 190 free breathing tests, and reached an estimated 200,000 listeners through a COPD awareness campaign that aired from May through December 2011. As the Cumulus Media Year of Service Award winner in 2012, Breathe NH also received \$100,000 of free media time on the radio stations to help promote the agency's mission and COPD awareness.

Thanks to the national campaign and the involvement of organizations like Breathe NH across the country, COPD awareness among U.S. adults has increased from 65% in 2008 to 71% in 2011.⁹

Eager Breather's Fresh Air Cruise — This unique event is designed for individuals living with COPD (Chronic Obstructive Pulmonary Disease) or other chronic lung conditions, their families, and healthcare providers. It provides a safe and fun environment for participants to spend the day with others like them while enjoying lunch, entertainment, and a valuable health information fair.

COPD Data Reports — Breathe NH has released two COPD issue briefs, one in 2011 and another in 2014, to expand the availability of NH-specific COPD data for various stakeholders.

Governor's Proclamation — A proclamation is secured annually to promote November as COPD Awareness Month in NH and encourage all residents to learn more about the prevention and treatment of COPD.

Lung Health Awareness Team — This group of active and dynamic volunteers works collectively to promote lung health issues in New Hampshire. They meet monthly at Breathe NH's office and are

involved in a wide range of activities, from generating media attention, hosting screening events, educating legislators, and volunteering their time and talents in a variety of projects.

November COPD Awareness Month — Breathe NH works with many partners to promote various outreach activities such as community COPD screening events, social media campaigns, and media advocacy activities.

Team Orange — This statewide team of individuals has one thing in common: They all have a lung condition and work together to raise awareness and funds for lung health in NH. Team Orange includes virtual riders from pulmonary rehabilitation (PR) programs, as well as stationary bike riders who gather on event day under a Team Orange tent.

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