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Introduction

Asthma is a chronic lung disease affecting people of all ages. It is caused by inflammation and muscle tightening around the airways, which makes it difficult to breathe. The WHO Package of Essential Noncommunicable Disease Interventions (PEN) was developed to help improve NCD management in primary health care in low-resource settings. [1]

Growing evidence suggests that implementing a Personalised Asthma Action Plan reduces hospitalisation. While delivering evidence-based care requires active patient engagement, there remains a limited understanding of Asthma self-management strategies among many individuals.

Objective

To increase and evaluate the level of understanding of Asthma patients on how to self-manage through structured education, ASHLEY: Support, Health, Learning and Empowerment for You.

Method:

The Croydon Respiratory Team (CRT) offers an integrated respiratory service that connects care between the acute hospital and the community. The CRT developed and delivered a programme consisting of two interactive 3-hour sessions held one week apart. The programme focused on self-management, peer learning, and behaviour change, and was delivered by a multidisciplinary team in accessible community venues. Multidisciplinary team comprising of Respiratory Practitioners, Health Care Support workers, Respiratory Physicians, and administrative staff members.



Results

Table 1 Hospital Admissions

ASHLEY	
N	103
No. of admissions Pre-ASHLEY	23
No. of admissions Post- ASHLEY	11
Percentage Reductions	52%

Table 2 Asthma Control Test

ACT, n=122	Initial Ax	Final Ax	Difference*		
Completed	n=41	n=41	n/a		
Mean	13.37	36.82	Pos+35.58%		
Median	10	19	Pos+90%		
Mode	8	19	Pos+137.5%		

Satisfaction Questionnaire

Your Views on the Course	n=40	1 Strongly Disagree	2 Disagree	Neither Agree nor Disagree	4 Agree	Strongly Agree	No Answer	
"The educator used words I understood"		nil	nil	nil	4	36	nil	4.9
"I was given a chance to ask questions"		nil	nil	nil	4	36	nil	4.9
"I would recommend this service to others"		nil	nil	nil	4	36	nil	4.9
Satisfaction Questionnaire		1 Extremely Dissatisfied	Z Mostly Somewhat Dissatisfie d	3 Neither satisfied nor dissatisfied	Mostly/S omewhat satisfied	5 Extremely Satisfied		
"How satisfied were you with the process of booking onto the sessions?"		nil	nil	nil	3	37	nil	4.9
"How satisfied were you with the venue"		nil	2	1	5	32	nil	4,6
"Overall, how satisfied were you with the sup provided by the programme"	port	nil	nil	nil	3	37	nil	4.9
"Compared to before your course attendance feel you have a better understanding of your and how to manage it?"		nil	nil	1	4	35	nil	4.8
"Overall, how satisfied were you with the co- attended?"	urse you	nil	1	nil	1	34	4	4.8

Impact

A total of 122 patients were referred, 43 enrolled, and 41 patients completed the program. The Asthma Control Test and Satisfaction Questionnaire were collected.

Overall, the participants were satisfied with the course (4.87 scores) and increased (median 43.28%) their understanding of Asthma to a better approach to a personalised asthma action plan, resulting in improved asthma control score by a median of 90%, which resulted in a 52% decrease in hospital re-admission.

Factors such as patient demographics, geographic location, literacy levels, and access to healthcare contribute to this variability and present challenges to effective self-management implementation.

Conclusion:

The empirical findings in this study demonstrate a low level of patient understanding of Asthma, and self-management can be improved through structured education.

Future Work

Future delivery should explore a hybrid model using digital technology, with further investigation into the barriers and enablers of tech-based support.

References

1. Global burden of 369 diseases and injuries in 204 countries and territories, 1990-2019: a systematic analysis for the Global Burden of Disease Study 2019. Lancet. 2020;396(10258):1204-22

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