

The fit between asthma self-management implementation strategies and practice context– a case study within the IMP2ART cluster randomised controlled trial

Sheringham J¹, Delaney B², MacLeod C³, McClatchey K⁴, Barat A⁵, Steed L⁵, Marsh V⁶, Hammersley V³, Taylor SJC⁵, Pinnock H³ for the IMP2ART study team
¹University College London, ²Sheffield University, ³University of Edinburgh, ⁴NHS Tayside, ⁵Queen Mary University of London, ⁶NHS Black Country ICB



IMP2ART

IMP2ART was a whole-systems strategy to help UK primary care practices implement supported asthma self-management

Nurse facilitation over a year enabled:

- Formation and tailoring of a team plan,
- Audit and feedback from electronic health records
- Online team/staff education,
- Communication and review templates,
- A 'Living with Asthma' website for patients and staff.

UK-wide cluster randomised implementation trial

The trial tested the impact of IMP2ART in 73 implementation group practices compared with 71 usual care practices.

Aim of the case studies

Within a comprehensive process evaluation, the case studies aimed to explore the influence of practice context on delivery and response to IMP2ART strategies.

Results

Practice B

Remote practice on 3 sites; recent merger.
The new practice asthma lead undertook a lot of training alongside IMP2ART

Increased capacity and nurse capability

"I knew nothing about asthma when we started and now I feel like I know quite a lot" (Nurse 2, Practice B)

High engagement with nursing team for the first few months of IMP2ART

"So we will continue to keep on improving ourselves... reviewing our work, auditing and then improving" (GP, Practice D)

GP lead ensured enactment across small team

Practice D

Multicultural population, GP-led asthma care

"We adapted our practice for urgent reviews of patients and how you said to do it" (GP, Practice D)

Little engagement with IMP2ART facilitation ... but they achieved their team goals

"I think it's something that just is an exaggeration of what we're doing and a way of improving what we're doing so it's a win win to me." (Nurse & asthma lead, Practice A)

Good teamwork is evident ..., they are really pulling together and embracing the opportunities to improve asthma management." (Facilitator, Practice A)

Practice A

Inner city disadvantaged population.
Nurse-led asthma care

Whole team approach, achieved goals

"Right let's just look how will you benefit? How will the patients benefit? How will the practice benefit?" (ANP, Practice A)

Practice C

Large practice, Affluent population.

IMP2ART information not cascaded to key staff

"We use case-based discussions during our half day rotas to explore better ways of understanding self-management of asthma" (GP, Practice C)

"No, I don't know who it [facilitator] is... So I think it could have been the boss that arranged it all" (Practice nurse Practice C)

The nurse went on to complete the education module

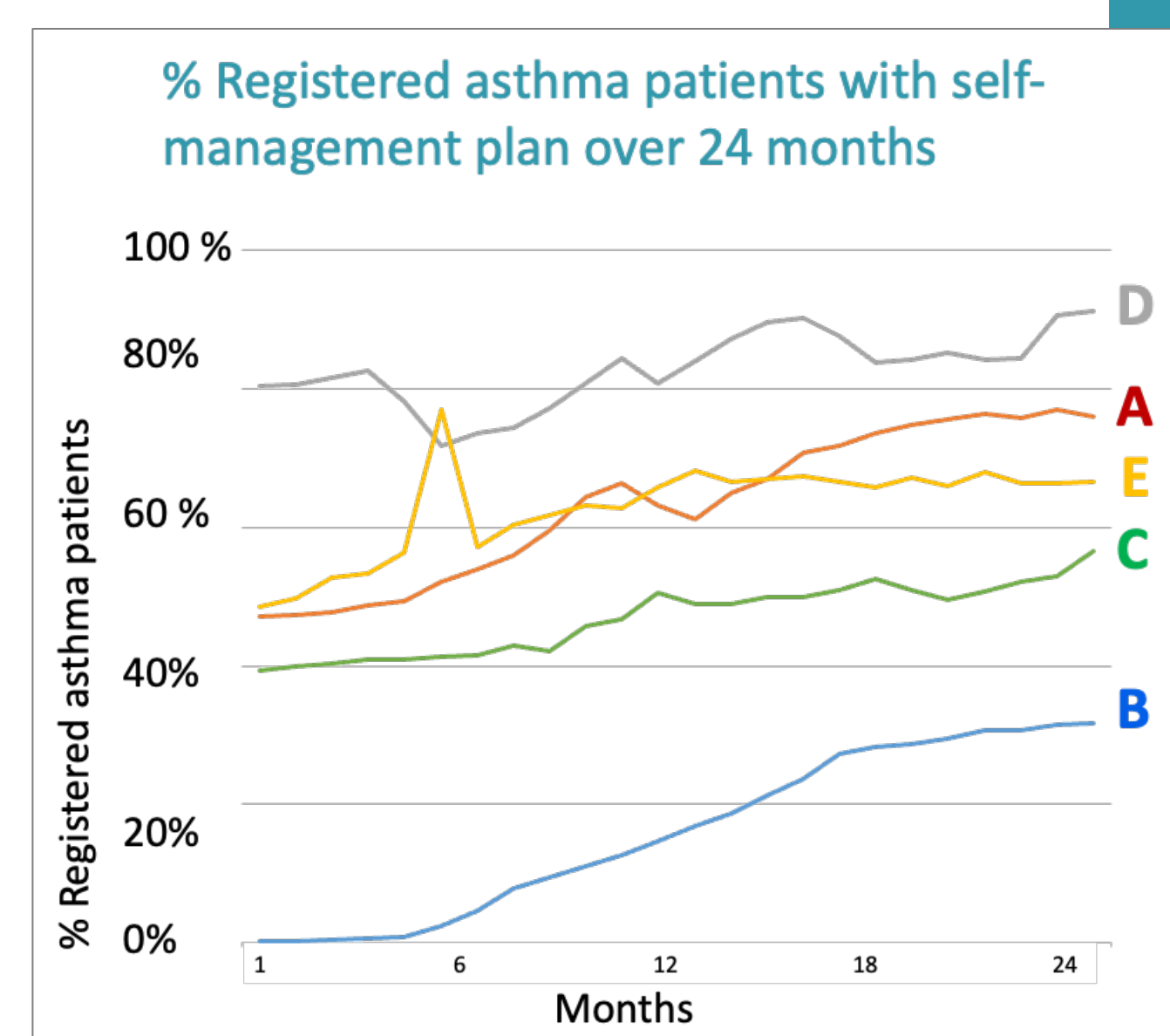
"One of the things we've implemented is a quarterly Saturday clinic. ...both asthma and COPD for the whole Saturday" (Nurse, Practice E)

Practice E

Diverse, inner-city practice with new asthma lead, Asthma care provided by healthcare assistants

Major changes in practice

No engagement with IMP2ART after the facilitation workshop but evidence of change



National context: what else was happening?

NHS England 'Quality and Outcome Framework'

2020/2021: action plans added as a required component of an asthma review.
Financial incentives delayed until 2023/24

COVID pandemic

Remote care encouraged
Increased patient motivation to engage
Massive changes to primary care delivery [and exhausted staff]

"I also think [self-management] has become a bit more relevant because ...of Covid" (Nurse Practice E)

"...so everything was a bit upside-down, wasn't it? ...even [GP] was shielding so there was just me here" (Nurse, Practice A)

"...with the QOF ... we had to hit certain milestones" (GP, Practice D)

"Lots of them haven't seen anybody for a long time over Covid, they feel quite keen to come in and engage with us" (Nurse 2, Practice B)

"It will be interesting with the new guidelines ...regimes that we will be moving to" (Nurse Practice B)



Conclusion

- Diverse practices with different baseline performance/challenges showed evidence of improvement in asthma self management.
- All practices were motivated to improve asthma care through staff development.
- IMP2ART had better reach in cohesive practices where asthma leadership was engaged.
- Rather than effecting change on practices, IMP2ART interacted with ongoing practice efforts to improve asthma care, alongside strong national and international drivers of change.