Delivery of Supported Self-Management in Asthma Reviews: A Mixed Methods Observational Study Nested in the IMP²ART Programme of Work
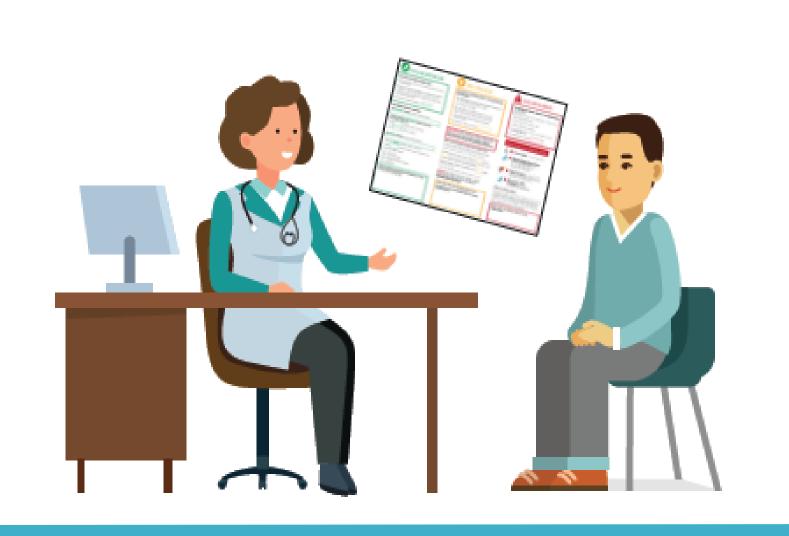## (IMPlementing IMProved Asthma self-management as RouTine)

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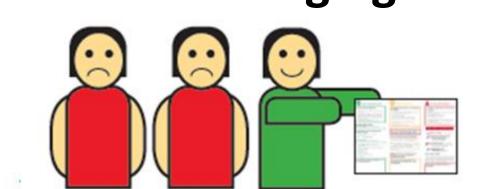
ASTHMA + LUNG UK

IMP²ART

Background

5.4 million people in the UK are currently receiving treatment for asthma: 1.1 million children and 4.3 million adults.[1]
Supported self-management for asthma reduces attacks and improves asthma control.[2]

However, implementation is challenging.

Only **1 in 3** people with asthma in the UK has an asthma action plan.

A UK-Wide team from Asthma UK Centre for Applied research have developed the **IMP²ART** three level implementation strategy:
1) Providing appropriate patient resources
2) Developing professional skills
3) Influencing organisation priorities and routines

Does IMP²ART work?
1) Does it increase the number of action plans provided?
2) Does it reduce unscheduled care?
How much does it cost?
How does it work?

Tested in a UK-wide RCT. **144** GP Practices allocated by randomisation to **IMP²ART (72)** or usual **asthma care (72).**

PhD Project

Nested within the IMP²ART Study, this PhD project aims to explore how supported self-management is delivered during asthma consultations using motivational and patient-centred strategies. The project will investigate between-group differences of IMP²ART implementation and control groups, and face-to-face versus remote delivery of supported self-management.

Primary Research Questions

To explore the between-group differences, the following research questions will be addressed throughout the project:

1. What proportion of time within a consultation is spent on self-management related tasks?
2. How are patient-centred & behaviour change techniques used in asthma consultations?
3. How do health professionals view the delivery of supported self-management within asthma reviews?
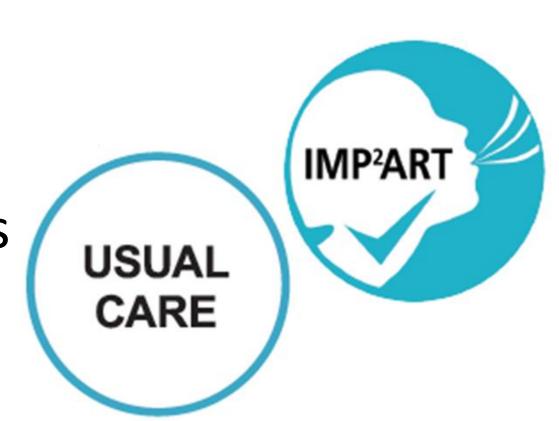
Methods

A three stage, mixed-method, observational study was conducted. Firstly a Rapid Realist Review exploring remote delivery of supported self-management during routine asthma reviews,
Video recordings of a sub-sample of the IMP²ART UK-wide cluster-RCT practices (implementation n≈4; control n≈6), collecting both face-to-face and remote (telephone/video-conference) reviews,
followed by follow-up semi-structured interviews with HCP's.

Results

Initial analysis suggests that HCPs in IMP²ART implementation practices deliver a more patient centred review, use more behaviour change techniques, and spend more time within consultations discussing supported self-management-related strategies. There is no significant difference between HCPs delivery of supported self-management strategies discussed between face-to-face and remote asthma reviews.

USUAL CARE IMP²ART

Questions to Discuss

We anticipate that the IMP²ART strategies will enable HCPs to embed supported self-management more effectively within asthma consultations, adding to the evidence that HCPs should be provided with specific training to implement a motivating and patient-centred asthma review. Findings will contribute to the IMP²ART process evaluation.

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