

Objectives

- The COVID-19 pandemic changed how we deliver care in general practice, with remote consultations (eg telephone, video calls and online) becoming the norm and it is likely that remote consultations are likely to continue to be an option in general practice beyond the pandemic.



- The IMP²ART cluster randomised controlled trial aims to embed supported self-management for asthma in routine practice.
- Consequently trial resources designed prior to the COVID pandemic required updating to reflect the addition of remote consultations in general practice as an option for asthma reviews.

Methods

- We carried out an online search for publicly available information with GoogleTM, using a combination of the search terms 'remote consultations', 'health care professional', 'general practitioner' and 'nursing'. We identified resources in documentary and video format, from a variety of sources including the NHS, GMC, BMA, MDU, Royal Colleges, Asthma UK and Academia. The guidance focused on acute consultations only, offering no advice specifically on reviewing long term conditions.



- The themes identified from these sources were discussed with the IMP²ART Professional Advisory Group (PAG) and the IMP²ART Patient and Public Involvement (PPI) group to explore their views of carrying out remote asthma reviews in primary care. The discussions were recorded with consent, and extensive notes were taken.

Results

PPI Group:

- They felt remote consultations were effective if both participants are well-prepared; it was suggested that the patient be given access to the questions prior to the review and the HCP should have all the pertinent patient information, e.g. medical history/medications etc.
- They felt that remote consultations would be more effective if the patient and HCP already knew each other, for the patient to be engaged in the process.
- They were more cautious about the potential disruption to continuity of care, particularly for long term condition reviews.
- There were concerns raised about inequitable access to the appropriate technology and a number of members highlighted the need to respect patient preference for mode of consultation.

PAG Group:

- They were less concerned about technological issues, drawing on their own experiences of carrying out successful remote consultations during the pandemic.
- They felt that remote reviews offer the potential for the improved management of long term conditions.
- There was a recognition that remote reviews will not be appropriate for a proportion of their patient population and that other options should be available.
- They identified future training needs for practice staff to carry out remote asthma reviews.

Conclusion: Following advice from both the PAG and PPI groups, we were able to adapt current guidance on remote consultations to the specific context of an asthma review. The results from the group discussions have informed the development of 'how to' resources for both health care professionals and patients, including infographics, videos and podcasts. General Practices randomised to the implementation arm of the trial will have access to these resources throughout their participation in trial.