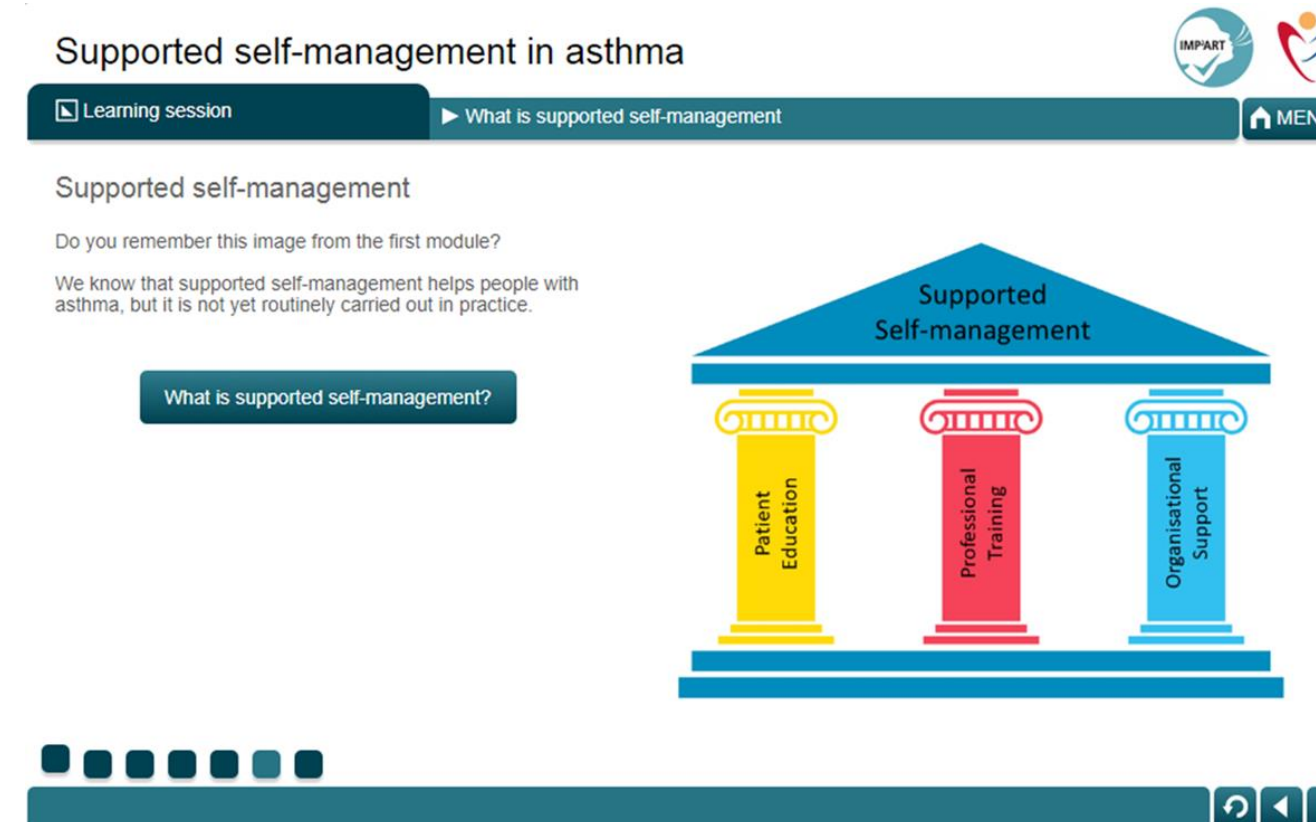


# Theoretically informed education to support asthma self-management in primary care: part of the IMP<sup>2</sup>ART programme

<sup>1</sup>Marsh V, <sup>1</sup>McClatchey K, <sup>2</sup>Last R, <sup>3</sup>Steed E, <sup>2</sup>Saxon A, <sup>3</sup>Taylor SJC, <sup>1</sup>Pinnock H for the IMP<sup>2</sup>ART programme group.  
Asthma UK Centre for Applied Research, <sup>1</sup>The University of Edinburgh, <sup>2</sup>Education for Health, <sup>3</sup>Queen Mary University of London

## Background

The IMPLementing IMPRoved Asthma self-management as RouTine (IMP<sup>2</sup>ART) programme is developing a whole-systems implementation strategy to improve delivery of supported asthma self-management in routine primary care. We aimed to develop professional education that targeted barriers to implementation and improved skills in delivering tailored supported asthma self-management.



## Findings

Both modules were received positively during testing and piloting. Piloting of Module 1 highlighted challenges with using the module in team meetings, leading to a more flexible approach to delivery, and earlier access to the module. Module 2 feedback led to changes in wording and additional explanation of included components. Changes have now been incorporated into the modules.



## Methods

- Underpinned by the Theoretical Domains Framework, a multidisciplinary team (educationalists, clinicians, health psychologists) along with a professional advisory group (n=10) developed two online educational packages, one for all primary care staff to be delivered in a team setting (Module 1), and one for clinicians who deliver asthma care (Module 2).
- Testing took place in general practices using think-aloud interviews (Module 1: n=17 from 2 practices; Module 2: n=6 from 4 practices).
- Additionally, 4 practices piloted Module 1, and three clinicians piloted Module 2.

## Discussion

The finalised modules will be integrated with patient and organisational components of the IMP<sup>2</sup>ART UK-wide cluster-RCT (n=144 practices), evaluating the impact of the implementation strategy on unscheduled care, ownership of asthma action plans, and cost-effectiveness.



This abstract presents independent research funded by the National Institute for Health Research under its Programme Grants for Applied Research Programme (Ref: RP-PG-1016-20008). The views expressed are those of the authors and not necessarily those of the NHS, the NIHR or the Department of Health.



@imp2art

FUNDED BY

**NIHR** National Institute for Health Research

For more information contact [imp2art@ed.ac.uk](mailto:imp2art@ed.ac.uk) or visit our website [www.edin.ac.uk/aukcar-imp2art](http://www.edin.ac.uk/aukcar-imp2art)



THE UNIVERSITY  
of EDINBURGH



Queen Mary  
University of London



**opc** Optimum Patient Care

Canterbury and Coastal  
Clinical Commissioning Group



The University  
Of Sheffield.

University of  
HUDDERSFIELD  
Inspiring tomorrow's professionals



Swansea University  
Prifysgol Abertawe