Asthma UK Centre for Applied Research

The IMP²ART programme

IMPlementing IMProved Asthma self-management as RouTine

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The burden of asthma in the UK¹

In 2010-2011 asthma resulted in:

6.3m primary care consultations

93,000 hospital in-patient episodes

1,800 intensive-care unit episodes

1,160 asthma deaths





IMP²ART

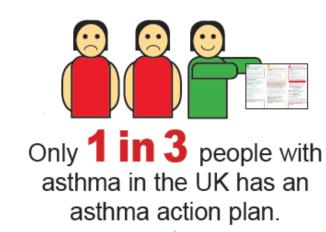
Supported self-management for asthma reduces attacks and improves asthma control²

is challenging³

IMP2ART programme grant schema

PDG1: Routine data: Validate and

Completed programme development grant



PDG3: Systematic review of

Implementation of supported selfmanagement requires:⁴

attention to patient resources,

BUT Implementation

- professional motivation and training, and
- organisational prioritisation and support

PDG2: Qualitative: How can self-



Building on preliminary studies, and working with general practices, Asthma UK, PRCS-UK and Education for Health the IMP²ART programme will:

PG1: Refine trial outcomes using routine data

PG2: Develop and refine the components of an implementation strategy with 6 practices



- Patient resources to support management (e.g. a range of action plans; flexible access to professional advice; digital options)
- Professional education to motivate and train practice team (e.g. online, teambased modules to raise awareness and provide specific skills)⁵
- Organisational strategies to facilitate adoption (e.g. audit/feedback; review templates; electronic action plans)⁶

refine primary outcomes management be implemented professional education valid process implementation training package Pre-grant: Map components of implementation strategy (funded by Asthma UK Centre for Applied Research) PG2: Refine/test individual components PG1 Refine outcomes Patient-facing strategies and resources PG6: Professional strategies and education Process Organisational strategies and routines evaluation **Programme** PG3: Pre-pilot: Integrate components; finalise; Grant Test feasibility and refine implementation strategy PG4: (Internal) pilot trial PG5: IMP²ART national cluster RCT with health economic evaluation End-of -project workshops Implementing asthma self-management in primary care practice

PG5: A UK-wide cluster RCT in 144 practices, with health economic evaluation and **PG6: Process evaluation**

We will randomise 144 practices to either the IMP²ART implementation strategy or the control group.

> Outcomes will be assessed in routine data and questionnaires to a sub-group of patients

PG3: Pre-pilot the implementation strategy

Facilitated by respiratory nurse specialists, practices will adopt

We will test the feasibility of the integrated implementation strategy in four practices

and adapt strategies to suit their practice routines.

PG4: Pilot the IMP²ART trial in 12 practices

We will pilot the trial procedures in a pilot randomised controlled trial (RCT)

Canterbury and Coastal Clinical Commissioning Group

Does IMP²ART work?

- Does it increase the number of action plans provided?
- Does it reduce unscheduled care?

How much does it cost? How does it work?

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5. McCleary N, et al, on behalf of the IMP²ART team. IMP²ART systematic review of education for healthcare professionals implementing supported self-management for asthma. npj*Prim Care Respir Med* (in press) Morrow S, et al, on behalf of the IMP²ART team. Exploring the perspectives of clinical professionals and support staff on implementing supported self-management for asthma in UK general practice: an IMP²ART qualitative study. npj*Prim Care Respir Med* 2017;27:45











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