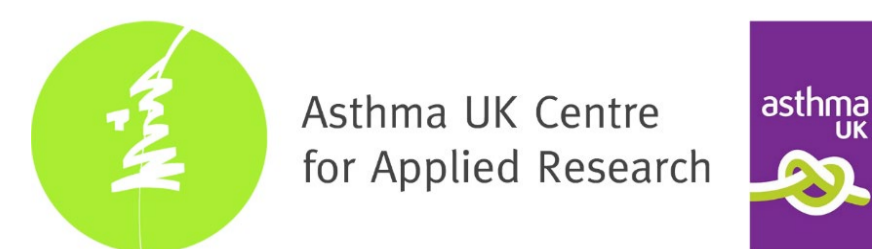




The IMP²ART programme



IMPlimenting IMProved Asthma self-management as RouTine

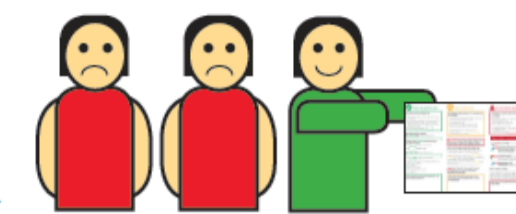
¹Hilary Pinnock, ¹Susan Morrow S, ¹Kirstie McClatchey, ²Steph Taylor, for the IMP²ART programme group. Asthma UK Centre for Applied Research, ¹The University of Edinburgh, ²Queen Mary University of London

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



BUT Implementation is challenging³



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

Implementation of supported self-management requires:⁴

1. attention to patient resources,
2. professional motivation and training, and
3. organisational prioritisation and support



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

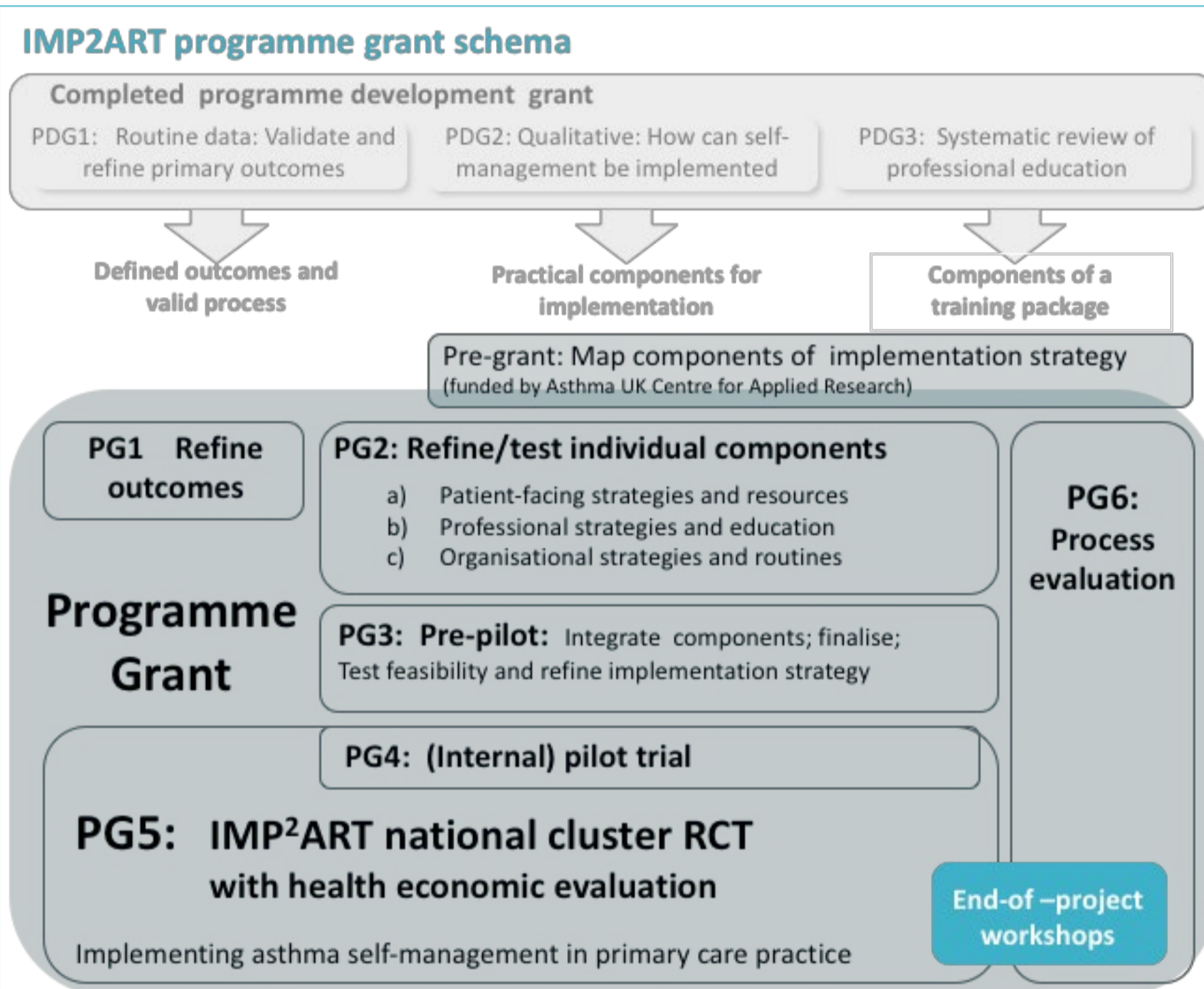


The IMP²ART programme

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 self-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, team-based modules to raise awareness and provide specific skills)⁵



- Organisational strategies to facilitate adoption (e.g. audit/feedback; review templates; electronic action plans)⁶

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



NHS 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?

Facilitated by respiratory nurse specialists, practices will adopt and adapt strategies to suit their practice routines.

PG3: Pre-pilot the implementation strategy

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

PG4: Pilot the IMP²ART trial in 12 practices

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

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2. Pinnock H, et al, for the PRISMS group. Systematic meta-review of supported self-management for asthma: a healthcare service perspective. *BMC Medicine* 2017;15:64
3. Pinnock H, et al. Implementing supported self-management for asthma: a systematic review of implementation studies. *BMC Medicine* 2015; 13:127
4. Asthma UK: Time to take action on asthma. London: Asthma UK; 2014
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)
6. 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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