Informing the development of asthma review templates: A mixed-studies systematic review of long-term condition (LTC) review templates in clinical consultations

K. McClatchey[1], M. Morrissey[1], E. Shepherd[1], E. Kinley[1], H. Pinnock[1]

[1]University of Edinburgh - Edinburgh (United Kingdom)

IMP²ART — Implementing improved asthma self-management as routine

Asthma UK Centre for Applied Research

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Introduction

Templates are widely used to promote guideline-driven management for patients with long-term conditions (LTCs). We wanted to inform the development of a comprehensive asthma review template that facilitates a patient-centred approach and ensures that care is delivered in-line with evidence-based guidelines.

Aim: Our mixed-studies systematic review aimed to identify qualitative and quantitative studies that explored healthcare professional (HCP) and patient views regarding the use of templates during routine clinical reviews, and investigate the effectiveness of review templates in improving asthma and other LTC care.

Methods

Following Cochrane methodology, we searched nine databases. A hand-search of reference lists and forward citation tracking of included studies was also completed. We assessed quality with the Critical Appraisal Skills Programme checklist (qualitative studies), and the Cochrane risk-of-bias tool and ROBINS-I tool (quantitative studies). Independent qualitative and quantitative syntheses were combined in an overall narrative synthesis (Figure 1).

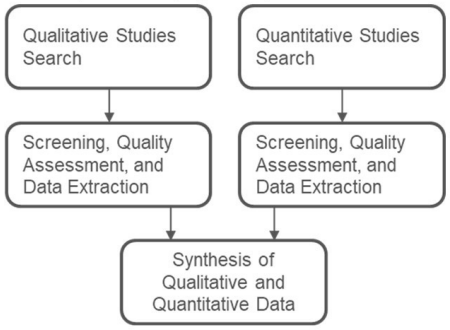

Figure 1 Mixed Studies Review Process.

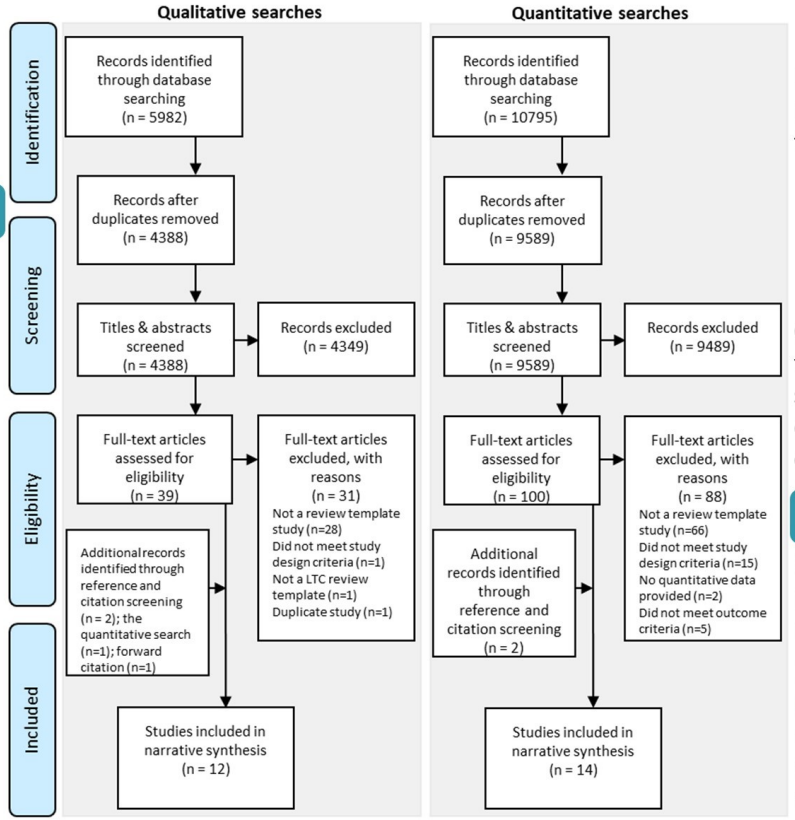

Figure 2 Review process (PRISMA Flow Diagram): details of review process.

Results

We included 12 qualitative studies and 14 quantitative studies (Figure 2). HCPs appreciated that templates established structure in reviews and acted as reminder tools. However, they were also viewed as '*tick box*', with the risk of prioritising the clinical over the patient agenda:

> ***"That becomes number crunching, ticking boxes and that's the bit I don't like"***

Further, there is concern that templates acted as a barrier to providing patient-centred care, and may limit the opportunity to support self-management:

> ***"You sometimes become so absorbed in the template that you can miss what is right in front of you in the patient"***

Quantitative findings of controlled trials showed that templates can improve documentation (e.g. symptom history, severity), and promote guideline adherence, but there was no evidence to suggest that templates improved clinical outcomes (e.g. unscheduled care).

Conclusions

Review templates improve documentation of care and guideline adherence, however may impact on patient-centred care and risk overriding the patient agenda.

In response, the **IMPlementing IMProved Asthma self-management as RouTine (IMP²ART)** programme has developed an asthma review template designed to promote patient-centred care and overcome the risk of reducing asthma reviews to 'tick-box' exercises.

For more information contact imp2art@ed.ac.uk or visit our website **www.edin.ac/aukcar-imp2art**

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