



UCLPartners Proactive Care Framework:

Asthma Management

The Challenge: COVID-19 disruption and historical lack of capacity in primary care





Real world primary care:

- Complexity, multimorbidity and time pressures
- Soaring demand and shifting priorities
- Winter pressures



Pandemic impact:

- Disruption of routine care in long term conditions
- Risk of poorer outcomes for patients and health inequalities
- An increase in health care demand



Historical challenge in long term condition care:

- Late diagnosis, suboptimal treatment, unwarranted variation
- Lack of self management support
- Holistic care not always provided

UCLPartners Proactive Care: A framework to address critical challenges in primary care



Aim

To improve care and free up capacity.

Objectives

- 1. Identify patients whose care needs optimising
- 2. Optimise care in clinical priority order, starting with those at highest risk
- Standardise delivery of holistic proactive care by primary care teams including ARRS* roles
- 4. Support GPs to safely manage workflow and release capacity
 - Stratify and prioritise
 - Task shift to the wider team

Framework components

- 1. Systematic risk stratification tools
- Resources to guide real world management of long-term conditions
- 3. Resources to support wider primary care team (including ARRS* roles) to deliver:
 - structured proactive care
 - structured support for education, self management and behaviour change

Atrial Fibrillation, Blood Pressure, Cholesterol, Chronic Kidney Disease, Non-Diabetic Hyperglycaemia, Diabetes

UCLPartners Proactive Care Frameworks



UCLPartners has developed <u>a series of frameworks</u> for local adaptation to support proactive management of Long-Term Conditions (LTC) in post-COVID primary care.

- Led by clinical team of GPs and pharmacists.
- Supported by patient and public insight.
- Working with local clinicians and training hubs to adapt and deliver.

Core principles:

- 1. Virtual where appropriate
- 2. Mobilising and supporting the wider workforce (including Additional Role Reimbursement Scheme roles and other appropriately trained roles)
- 3. Step change in support for self-management
- 4. Digital innovation including apps for self management and technology for remote monitoring









UCLPartners Proactive Care Frameworks: Supporting primary care to do things differently ... at scale



Core Elements of the Frameworks:

- ✓ Stratification and prioritisation
- ✓ Greater use of ARRS* roles
- ✓ Support for self-management
- Significant national uptake
- 12,000 downloads of search tools
- Adopted into NHSE @home programme for LTC recovery (14 ICSs)
- National BP Optimisation programme (15 AHSNs all ICSs)





AF, Blood Pressure, Cholesterol, Type 2 Diabetes, Asthma, COPD, Severe Mental Illness

Copyright © UCLPartners 2022 *Additional Role Reimbursement Scheme

Patient and Clinician Feedback



"First time I have not felt dismissed or judged" – Patient feedback

"... the stratification tools are wonderful...super-easy to upload and already in a few days making a difference to patient care and staff resilience in my PCN..."

Dr Hannah Morgan, Clinical Director Hayling Island & South Emsworth PCN

"The UCLP Proactive Care Frameworks are a great resource for primary care that can help transform our approach to targeting health inequalities."

Dr Bola Owolabi, Director Health Inequalities, NHS England

UCLPartners Proactive Care Frameworks for Local Adaptation

UCLPartners

Principles:

- Virtual where appropriate
- Wider primary care workforce
- Step change in self management
- Digital technologies

Stratify (clinical, ethnicity, social factors)

Low priority Medium priority High priority

- 1. Begin with highest priority
- 2. Use wider workforce to share delivery of care
- 3. Innovation to support remote care and self care

High priority – early review

Prescribing clinician

Medium priority – phased review

Prescribing clinician

Low priority – holistic proactive care

E.g ARRS* roles/

other appropriately trained roles

ARRS* roles /
other
appropriately
trained roles
Structured support

for education, self management and lifestyle change.

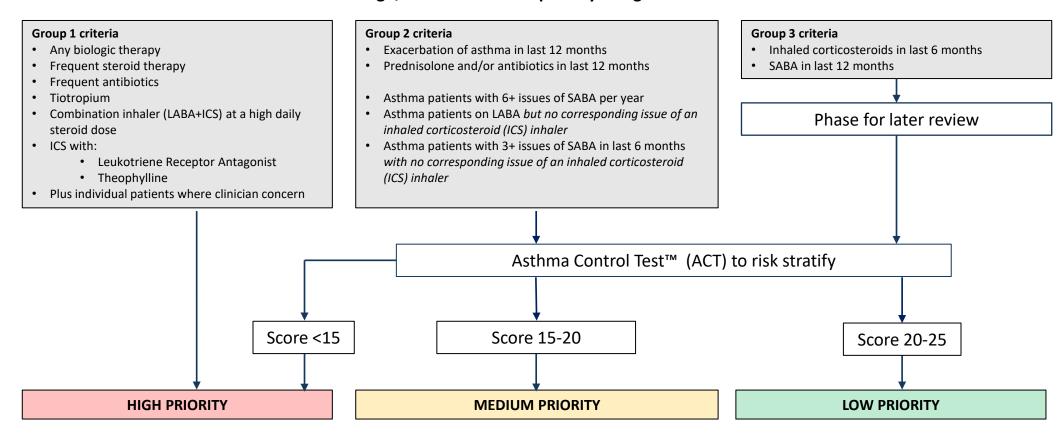
Arrange bloods, collate data to inform risk assessment.

Long Term Condition Pathway: Asthma



1 Identify & 2 Stratify

Search tool identifies patients with asthma. These patients are stratified into 3 groups depending on clinical characteristics, and then further stratified into high, medium and low priority using the Asthma Control Test™ score*.



^{*}The Asthma Control Test™ provides a snapshot as to how well a person's asthma has been controlled over the last four weeks and is applicable to ages 12 years or older. Available here: www.asthma.com/additional-resources/asthma-control-test.html

Long Term Condition Pathway: Asthma



Manage

ARRS* role/ other appropriate role undertakes initial contact for all risk groups to provide smoking cessation advice, inhaler technique, check medication supplies and signpost to resources

High priority

GP/ Nurse Specialist/ Specialist Respiratory **Pharmacist**

- Titrate therapy, if appropriate
- Ensure action plan in place
- Check adherence, inhaler technique, spacer advice
- Rescue packs prescribed if necessary
- Review of triggers, e.g. hay fever
- Exacerbation safety netting
- Follow up and referral as indicated

Medium priority

Nurse/ Clinical Pharmacist/ Physician **Associate**

- Check optimal therapy; Titrate, if appropriate
- Review triggers, e.g. hayfever
- Check adherence, inhaler technique, spacer advice
- Exacerbation management advice
- Repeat ACT as per recommendation from ACT test result and escalate to GP/Nurse if red or amber

Low priority

ARRS* role/ other appropriately trained staff

- Check inhaler usage & technique; signpost to education; spacer advice
- Exacerbation management advice including mild hayfever symptoms
- Signpost to appropriate information for:
 - Lifestyle information
 - Smoking cessation support
 - Exercise
 - Appropriate resources



Digital Support Tools to support patient self-management

Inhaler Technique: www.asthma.org.uk/advice/inhaler-videos/ www.rightbreathe.com Asthma deterioration: www.asthma.org.uk/advice/manage-your-asthma/getting-worse/ General Health Advice www.asthma.org.uk/advice/manage-your-asthma/adults/

Smoking Cessation: https://www.nhs.uk/better-health/quit-smoking/

When prescribing or reviewing inhalers, consider inhalers with least impact on the environment, see here for more information.

Asthma Pathway: Medium and High Priority Asthma



The Primary Care Respiratory Society has published a helpful guide to the <u>Good Asthma Review</u>.

Primary Care Respiratory Update

The building blocks of a good asthma review in adults

Assess

Assess control, severity and risk of exacerbations using a validated or endorsed tool

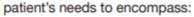
Review

Review diagnosis and management including the following:

- Confirmation that the diagnosis is correct
- Clinical examination/history
- · Check inhaler technique
- Managing tobacco addiction
- Drug therapy
- Compliance/adherence
- · Lifestyle and social issues
- · Co-morbidities

Collaborate

Work with the patient to develop, maintain and review a self-management/action plan specific to the



- Information on regular treatment/maintenance therapy as well as any relevant notes on technique and any repeat prescription advice
- · What to do if symptoms become worse
- What to do in an emergency/defining an emergency (including information on rescue pack if appropriate) who to contact, when and how
- · Information on staying well/avoiding triggers
- Other advice and information on who to contact with guestions



Digital Resources to support self management: Asthma





Asthma

- Understanding asthma
- What to do in an asthma attack
- Help to manage your asthma
- How to use your inhaler

Diet

NHS information on how to eat well

Exercise

- Better Health website Get active
- Asthma UK When exercise triggers your asthma
- Getting active around the home: tips, advice and guidance on how to keep or get active in and around the home from Sport England.
- Dance to health: Online dance programme especially tailored to people over 55 years old.

Smoking cessation

Better Health website - Support, stop smoking aids, tools and practical tips.

Mental Health

Better Health website – Be kind to your mind.

Peer support

Communities of people living with asthma.

Proactive Care Frameworks: implementation & support package



Implementation Support is critical to enable sustainable and consistent spread. UCLPartners has developed a support package for the Integrated Care Systems within our geography covering the following components. Contact your local <u>Academic Health</u> <u>Science Network</u> to enquire about available support in your geography.

Search and stratify

Comprehensive search tools for EMIS and SystmOne to stratify patients.

- Pre-recorded webinar as to how to use the searches.
- Online FAQs to troubleshoot challenges with delivery of the search tools.

Workforce training and support

Training tailored to each staff grouping (e.g. some ARRS* roles) and level of experience.

- Delivery: Scripts provided as well as training on how to use these underpinned with motivational interviewing/ health coaching training to enable adult-to-adult conversations.
- **Practical support**: Recommended training e.g. correct inhaler technique; correct BP technique, Very Brief Advice for smoking cessation, physical activity etc.
- Digital implementation support: how to get patients set up with appropriate digital.
- Education sessions on conditions.
- Communities of Practice.

Digital support tools

Digital resources to support remote management and self-management in each condition. **Implementation** toolkits available where required, e.g. MyCOPD. Support available from UCLP's commercial and innovation team for implementation.



Thank you

For more information please contact:

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Version tracker

| Version | Edition | Changes Made | Date amended | Review due |
|---------|---------|--|---------------|---------------|
| 2 | 2.0 | Updated slide 3 to highlight a focus on virtual delivery where appropriate Slides moved to new slide template | August 2021 | February 2022 |
| 2 | 2.1 | Wording amended to reflect priority groups not risk groups. Introduction slides updated HCA roles amended to ARRS roles Information added on use of inhalers with least impact on the environment | December 2022 | December 2023 |