

This desktop helper is intended to help clinicians working in primary care to provide personalised care to adult patients with asthma. It provides practical guidance on questions to ask, advice to give and action to take in consultations with patients. It focuses on diagnosis, treatment planning and treatment reviews as key stages of asthma management. It has been developed with the input of patients, researchers and clinicians.

What is personalised care?

Personalised care supports patients to develop the knowledge, skills and confidence they need to more effectively manage and make informed decisions about their own health and health care.¹ It identifies what is most important to each person and ensures that the care they receive is designed around their individual needs. It is sometimes called person-centred care or personalisation. Recently there has been growing interest in the role of precision medicine and individualised prescribing based on phenotypes for asthma. While these are aspects of personalised care, it also includes shared decision-making, personalised care planning and self-management support.

Why is personalised care important for patients with asthma?

Evidence shows that patients' ability to self-manage their asthma has a major impact on outcomes including asthma control, exacerbations, hospital admissions and quality of life.² Clinicians can support patients to develop the knowledge, skills and confidence to self-manage by listening to their views and preferences, understanding their personal circumstances and priorities and taking account of these when prescribing medication and providing information. If care is personalised and decision-making is shared, patients are more likely to accept the necessity of medication, have fewer concerns about adverse effects, understand their triggers and feel they have the ability to control their own asthma. This improves patient outcomes and efficient use of healthcare resources.

Providing personalised care for adults with asthma during:

Diagnosis

How diagnosis is made and communicated is very important as it has an impact on how patients feel about having asthma. This in turn will influence their ability to self-manage. For example, if a patient does not accept the diagnosis they are more likely to be non-adherent. Diagnosis for many patients is a process that takes place over several visits, rather than a one-off event, so it requires an on-going dialogue between clinician and patient.

ASK

- Why are you here today?
- What do you think it could be?
- What do you know about asthma?
- How do you feel about being diagnosed with asthma?

ADVISE

- Asthma is manageable with the right treatment and need not restrict your life and what you love to do. In fact, many famous sports people and public figures have asthma.
- Self-management by patients is crucial. That means understanding asthma and what triggers it, developing awareness of your asthma control and taking medication properly.
- There are benefits of an accurate diagnosis, including treatment being more effective, feeling better, having fewer limitations on activities and not being prescribed incorrect treatment, such as antibiotics for a chest infection.

ACT

- Use an objectively monitored test of treatment (inhaled corticosteroids not short acting beta agonists) as a way to help patients participate in the decision of their own diagnosis.
- Show what asthma is using props such as models, pictures, metaphors and videos.
- Provide internet links to reliable sources of information such as patient association websites.
- Be compassionate and use phrases that indicate empathy with and care for the patient as this can help develop trust.

What is really going on?

I can clearly hear wheezing. Their asthma control is poor. How can I get them to understand they really need to take their medication as prescribed?

I can't have proper asthma - I hardly ever get symptoms. I won't say so as he might be offended if I tell him he's got it wrong. I'll agree with what he suggests then take the reliever when I know I need it.

How are you today?

I'm fine, thanks doctor



Planning treatment

Treatment needs to be planned together with the patient and must take account of their priorities and preferences. This means the patient is more likely to adhere to treatment because they are confident it is necessary, is likely to be effective and takes account of their preferences as far as possible.

ASK

- How does your asthma affect your daily life now and how would you like to change that?
- Where would you like to be in terms of your asthma in 6 months?
- What type of activities would you like to be able to do?
- What do you think will be important for you in an inhaler (eg how portable it is)?
- What factors could get in the way of using your medication (eg if you have to pay for prescriptions, are you concerned about the cost?)
- Have you used tobacco in the last 12 months, including only occasional use?

ADVISE

- Explain there are different types of inhaler available and advise which ones would be appropriate.
- Explain what spacers are for, discuss if they want or need one and prescribe if appropriate after discussion.
- Prime the patient that inhaler technique will be reviewed as a matter of course by saying “we all drift off in our techniques over time, so we will check in with you from time to time.”
- Give examples of potential triggers, eg allergens, exercise, environmental factors.

ACT

- Show the patient sample inhalers.
- Demonstrate inhaler technique using props, offer leaflets and videos to assist technique, eg www.rightbreathe.com.
- Identify potential triggers with the patient and plan how to manage these together.
- Tailor the treatment plan to take account of the patient's personal circumstances, ability and willingness to avoid their asthma triggers.
- Develop with the patient a written asthma action plan which explains clearly how to recognise something is going wrong, what to do and when and how to seek help.³
- Help patients who smoke to quit. Refer to the IPCRG Desktop Helper on helping patients quit smoking: brief interventions for healthcare professionals.⁴
- At the end of the session, ask the patient to summarise what you have agreed and check that they understand and support this.

Treatment reviews

Treatment reviews are important opportunities to follow up on how effectively patients are managing their symptoms. It is very important patients are enabled to give their own perspective and describe how they are using medication in their day to day life. This means it is important they don't feel judged.

ASK

- How do you feel about your asthma at the moment?
- Did you reach your goals?
- Did you have to adapt your treatment plan?
- Are you using any alternative therapies?

ADVISE

- Set the scene so the patient feels able to report if they are not taking their medication as prescribed, eg explain “many patients don't take their medication as outlined in their treatment plan for different reasons. Have you changed your treatment plan?”
- Provide constructive feedback to the patient from the perspective of a coach supporting them to reach their goals, rather than judging them.

ACT

- Agree the frequency and format of reviews with the patient.
- Ask the patient to bring their own inhaler to the review and check inhaler technique using this.
- Use a recognised patient questionnaire to assess their symptoms, eg CARAT⁵, ACT^{TM 6}, ACQ⁷.
- Monitor treatment performance, including clinical outcomes, patient relevant outcomes and economic impact.
- Use asthma review checklists as a way of prompting points of conversation and recording shared decisions but try to avoid this feeling like a tick box episode.
- If the patient has daily symptoms and regular exacerbations despite apparently using the best treatment, refer to the IPCRG Desktop Helper on improving care for difficult to manage asthma.⁸

References:

- 1 The Health Foundation. Person-centred Care Made Simple. 2014.
- 2 Pinnock H. Supported self-management for asthma. *Breathe*. 2015;11(2):98-109. doi:10.1183/20734735.015614
- 3 An example is available at www.asthma.org.uk/advice/manage-your-asthma/action-plan/
- 4 Available at: www.ipcr.org/desktophelpers
- 5 Available at: www.caratnetwork.org/
- 6 Available at: www.asthmacontroltest.com
- 7 Available at: www.qoltech.co.uk/acq.html
- 8 Available at www.theipcr.org/display/TreatP/Home+-+Difficult+to+manage+asthma

Listening and responding to patients' views and preferences



This desktop helper aims to be practical: it is based on the IPCRG network's own experience of trying to implement best practice. It was generated from the evidence, guidelines and experience shared at an experience-led care meeting in October 2017. This desktop helper is advisory; it is intended for general use and should not be regarded as applicable to a specific case.

An IPCRG position paper Making the Case for Personalised Care for Adults with Asthma is also available at www.ipcr.org/personalisation

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