




**National
Asthma
Council** AUSTRALIA

RETHINKING WRITTEN ASTHMA ACTION PLANS

PROJECT REPORT



Written Asthma Action Plans (WAAPs) have been an integral part of asthma self-management for over 20 years. While the National Asthma Council Australia (NAC) continues to emphasise the importance of having up to date WAAPs, we know that uptake and usage of WAAPs is less than optimal.

As part of our commitment to the National Asthma Strategy 2018 and our strategic objective to build Australia's capabilities in helping people with asthma to live well, we spearheaded an extensive project re-evaluating WAAPs as a self-management tool.

PHASE 1

RESEARCH AND ANALYSIS

In the initial phase, which was designed to examine the effectiveness of current WAAPs and investigate options for improvement, we established the status of WAAPs in Australian asthma care frameworks through a series of key informant interviews, a community survey, rapid review landscape scan and patient and practitioner focus groups.

Based on these findings we ascertained that there were over 40 different WAAP templates in use across Australia, and that while underutilised in adult (25%) and child (40%) populations, WAAP remains a valid self-management tool.

COMMUNITY SURVEY

In August 2018, a cohort of asthma consumers were surveyed to gather baseline information about the current use of WAAPs by patients, determine what users do and don't like about WAAPs, ascertain barriers to WAAP uptake and adherence, and identify themes for use in subsequent project phases.

Key findings from those surveyed include:

- **45%** have a WAAP and use it
- **20%** have a WAAP but don't use it
- **50%** of WAAP users say it helps them deal with asthma flare-ups
- **45%** of WAAP users say it helps them know what medication to take and when
- **40%** of WAAP users say it helps them recognise when their asthma isn't well controlled
- **40%** of those without a WAAP say their GP didn't provide one
- **36%** say they don't carry their WAAP with them
- **25%** of those not following a WAAP say it's inconvenient to visit a GP to get it updated
- **30%** of those not following or without a WAAP say they don't like the design, and **27%** say they don't like the paper form and won't carry it.

RAPID REVIEW LANDSCAPE SCAN

A scan, undertaken by Zosel Consulting in June 2018, examined the effectiveness of current WAAPs, while identifying key issues, themes and possibilities for improving WAAPs and enhancing asthma self-management.

Key findings from the report include:

- The effectiveness for asthma self-management education, which includes WAAPs alongside patient education and self-monitoring and regular medical review, was clearly established in both adults and children; and that the evidence was strong, Level One evidence.
- An audit of WAAPs currently available in Australia and in a selection of countries where national asthma strategies exist identified a total of 44 unique asthma action plans and that limited, but growing use of technology was evident, alongside a growing evidence base supporting the use of technology to improve asthma outcomes.
- Asthma self-management education was essential to asthma management, that it could be provided by health professionals other than doctors, and that there was potential for an increased role for community pharmacists and nurses in asthma care and self-management education, including the provision of WAAPs.
- A number of barriers and enablers for asthma self-management including WAAPs were identified, including factors at the patient, health professional and health care system levels. Opportunities to improve WAAPs and asthma self-management were also identified.
- There is an urgent need to identify new, evidence-based approaches to realising the benefits associated with WAAP use; and to develop novel interventions predicated on an appreciation of the barriers and facilitators to the issuing of WAAPs by professionals and their use by patients/carers, and that the realities of clinical practice and living with asthma need to be factored in to the design of asthma self-management education interventions.

INFORMANT INTERVIEWS

In September 2018, interviews with healthcare professionals from various sectors and backgrounds, including chronic disease management, health technologies, medical software, and behavior change were conducted by Davidson Consulting.

Questions were informed by the community survey and landscape review results, with a focus on generating solutions for the identified barriers including consideration of behavioural insights, current asthma self-management approaches, and opportunities presented by the health system and technological apps and wearables.

The key informants were unanimous in their belief that WAAPs retain a crucial place in the current suite of asthma management, however, their view overall was that WAAPs are not functioning as they ideally could — and their clear benefit in theory was not translating into clinical reality.

Key informants identified a number of barriers to uptake including:

- **Complexity** — too many action plans to choose from
- **Time** — process to filling out a WAAP is time consuming in a limited consultation period
- **Multiplicity** — need to streamline current suite of plans
- **Perception** — that asthma is not a critical condition but rather an inconvenience
- **Format** — electronic plans are far more accessible, usable and recordable
- **Alignment** — between WAAP, medication labels and prescriptions can be confusing

Despite the low uptake at present, WAAPs still have an important role to play in asthma management. A more integrated and streamlined approach that considers changing the format of the plans, dissemination, patient engagement and education and organisation strategies for initiating plans should be considered.

STAKEHOLDER FOCUS GROUPS

Conducted in December 2018 by Davidson Consulting, a series of focus groups explored findings from the survey, landscape scan and informant interviews, along with other learnings in more depth.

Recognising the need to reach outside NAC's existing contributor network, two consumer groups and one health professional group with no prior association with NAC were recruited by a professional market research recruitment agency in addition to two existing NAC advisory groups.

Areas covered during the session included perceptions of and attitudes towards asthma, interactions between patients and health professionals, familiarity and experience with WAAPs, and suggestions for the uptake and design of WAAPs.

Across the five focus groups some consistent themes emerged. At times these were around the same issue where there was a divide in opinion

or perception, but at other times there was a universal view or attitude expressed. The top themes included:

- **Awareness:** Lack of awareness of the potential seriousness of asthma and the need to establish that asthma is an important issue that needs to be treated and managed as such
- **Good in theory:** From differing but complementary perspectives it was agreed that the idea of a WAAP is a good thing but there are attitudinal and practical barriers
- **Person-centred and real-life approach:** knowledge of how consumers manage their asthma in ways that fit their lifestyle and situation is crucial to understanding the WAAP process
- **Discussion:** Beyond the tangible product, education and dialogue about how to manage asthma when things go wrong was essential between consumers and health professionals

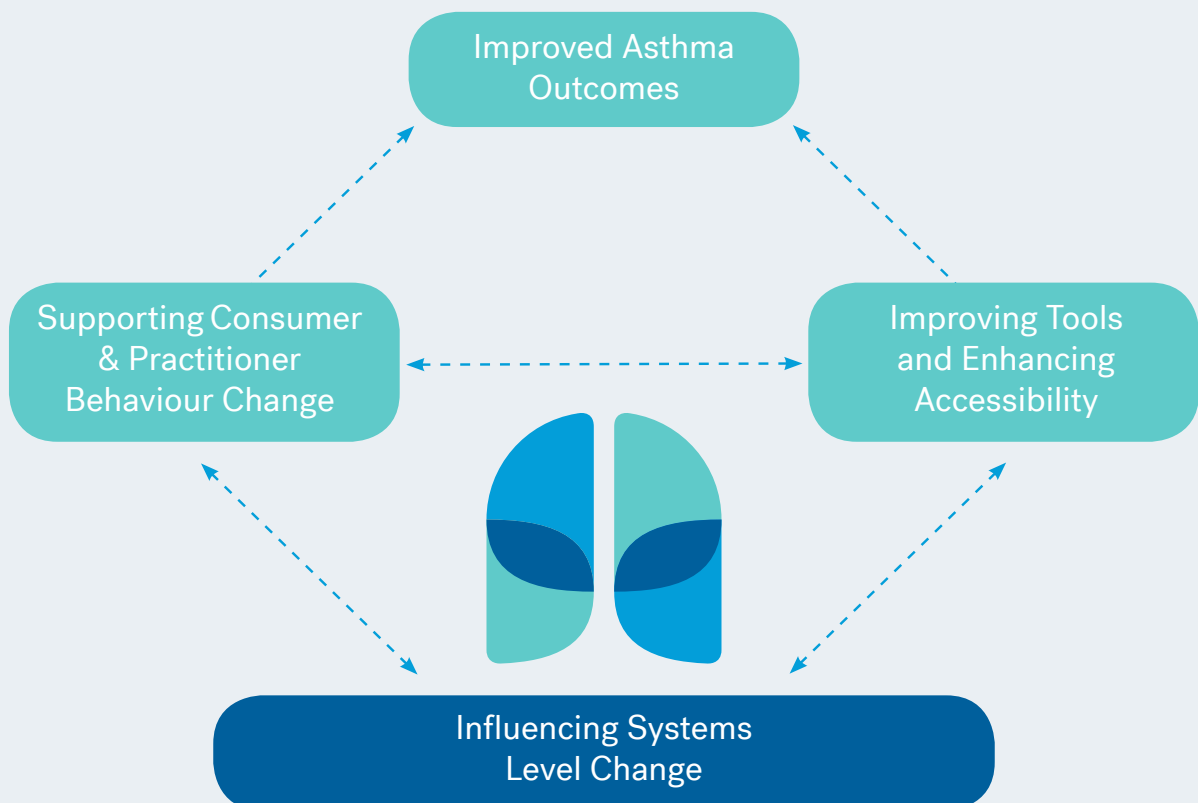
- Disease specific: Consumers and health professionals questioned the need for separate asthma action plans especially when managing more than one chronic condition
- WAAP templates: confusion between WAAPs and Asthma First Aid, children's and adult WAAPs, and the many different WAAP templates
- Awareness: greater understanding of asthma and the psychology of the condition and the role it plays in people's lives
- Technology: potential technological solutions to help manage asthma and improve health outcomes were embraced plus an easier way to get, understand and use a WAAP.

FINDINGS

The amalgamation of evidence and input from Phase 1 identified five key themes for exploration in Phase 2:

1. The need to develop fit for purpose asthma action plan templates
2. Consideration of the psychological aspects of asthma
3. The broader role of health professionals involved in asthma care
4. Equitable availability of asthma medications
5. Research and knowledge translation.

A consultative model was developed by Davidson Consulting to underpin discussions on ways to transpose the five key themes into tangible projects aimed at taking WAAP into the future.



PHASE 2

CONSULTATION FOR FUTURE OPTIONS

Through a series of four online workshops, presented and facilitated by leading experts, and with input from healthcare professionals across the asthma space, NAC refined the scope of projects for a Phase 3 roll-out.

ONLINE WORKSHOPS

Project overview: In the initial workshop, NAC Chair, Dr Joanna Wriedt and CEO Siobhan Brophy introduced speakers for the subsequent workshops and presented the project work to date including the purpose, stages, key findings and take out messages.

Asthma management tools: Stakeholders considered a case study demonstrating redesign of an Action Plan for Asthma Flare-Up for schools and childcare services presented by Melinda Gray CNC Paediatric Asthma and Christine Burns CNC Asthma at Sydney Children's Hospital Randwick and looked at ways to utilise these findings in rethinking WAAPs.

The psychology of asthma: Australian Centre for Behavioural Research in Diabetes Research Fellow, Dr Amelia Lake, presented a case study on development of the 'Who is looking after your eyes?' leaflet. Amelia illustrated the step-by-step process of how to promote healthy habits using audience specific psychological data and validated behaviour change messaging which was focus tested and bespoke adjusted by the target group. Participants discussed how to adapt this strategy for asthma management and WAAPs.

Systems level change: NAC CEO Siobhan Brophy presented on the organisation's capacity to draw on established networks and policy frameworks to effect systems level change and invited discussion on specific objectives, actions, partnerships and priorities around five key ideas which were distilled into an 'Action plan for Action Plans'.



ACTION PLAN FOR ACTION PLANS

Drawing on our established networks we are spearheading a series of five collaborative, co-designed and evidence-guided initiatives that will optimise asthma self-management and create tools for all Australians.

1. Revise standardised templates

Through a co-design approach with consumers we aim to revise standardised templates and advocate for consistent national approaches to plans, including plans for day-to-day management, plans for treating flare-ups, plans for schools and other carer settings, and first aid plans.

2. Pursue technological solutions

We're looking at the potential for WAAP integration into existing or new technological developments such as My Health Record and primary practice software and updating our own Asthma Buddy.

3. Provide workforce support

In collaboration with key stakeholders we'll be looking at ways to optimise the role of pharmacists and nurses to support uptake of WAAPs while considering factors including existing responsibilities and scope of practice.

4. Raise public awareness

Underpinned by behavioural insights research and utilising patient co-design, we aim to increase WAAP effectiveness and uptake through a public awareness campaign.

5. Advocate for system changes

By partnering with other health professional bodies, we aim to advocate for change that addresses barriers from a systems perspective, while also identifying sustainable workflow models.

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NAC Asthma Advisory Groups

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