



# Developing a practical framework for facilitation to implement supported self-management of asthma in primary care; an exemplar from the IMP<sup>2</sup>ART Trial



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## Introduction

IMPlimenting IMProved Asthma self-management as RouTine (IMP<sup>2</sup>ART) is a programme of work developing and evaluating a strategy for implementing supported asthma self-management in UK primary care.

**Facilitation**, as specified in the i-PARIHS implementation theory, is a core component of IMP<sup>2</sup>ART but adaptation to practice need is key.

The IMP<sup>2</sup>ART facilitators are respiratory nurse specialists with additional expertise in education and facilitation but with little experience of implementation research. This abstract reports the development of a framework to support the facilitation process and maintain fidelity to the IMP<sup>2</sup>ART trial protocol.

## Methods

A team of educationalists, researchers and behavioural experts worked together to define facilitation for the purpose of the IMP<sup>2</sup>ART Trial developing:

- 1) facilitator training
- 2) a schedule of core facilitator activity
- 3) a range of resources to support facilitation

## Results

A facilitator, defined as a trained individual linked to a practice to support and tailor IMP<sup>2</sup>ART resources, was allocated to each of the 73 practices in the implementation group.

The schedule detailed the minimum number of contacts and suggested activity (e.g. workshop, meeting or email) and maximum facilitator support time (up to 12 hours) for each practice, but allowed flexibility within these limits.

Resources included a core schedule, workshop guide and slide set, field notes template for each practice, and a range of adaptable email templates.

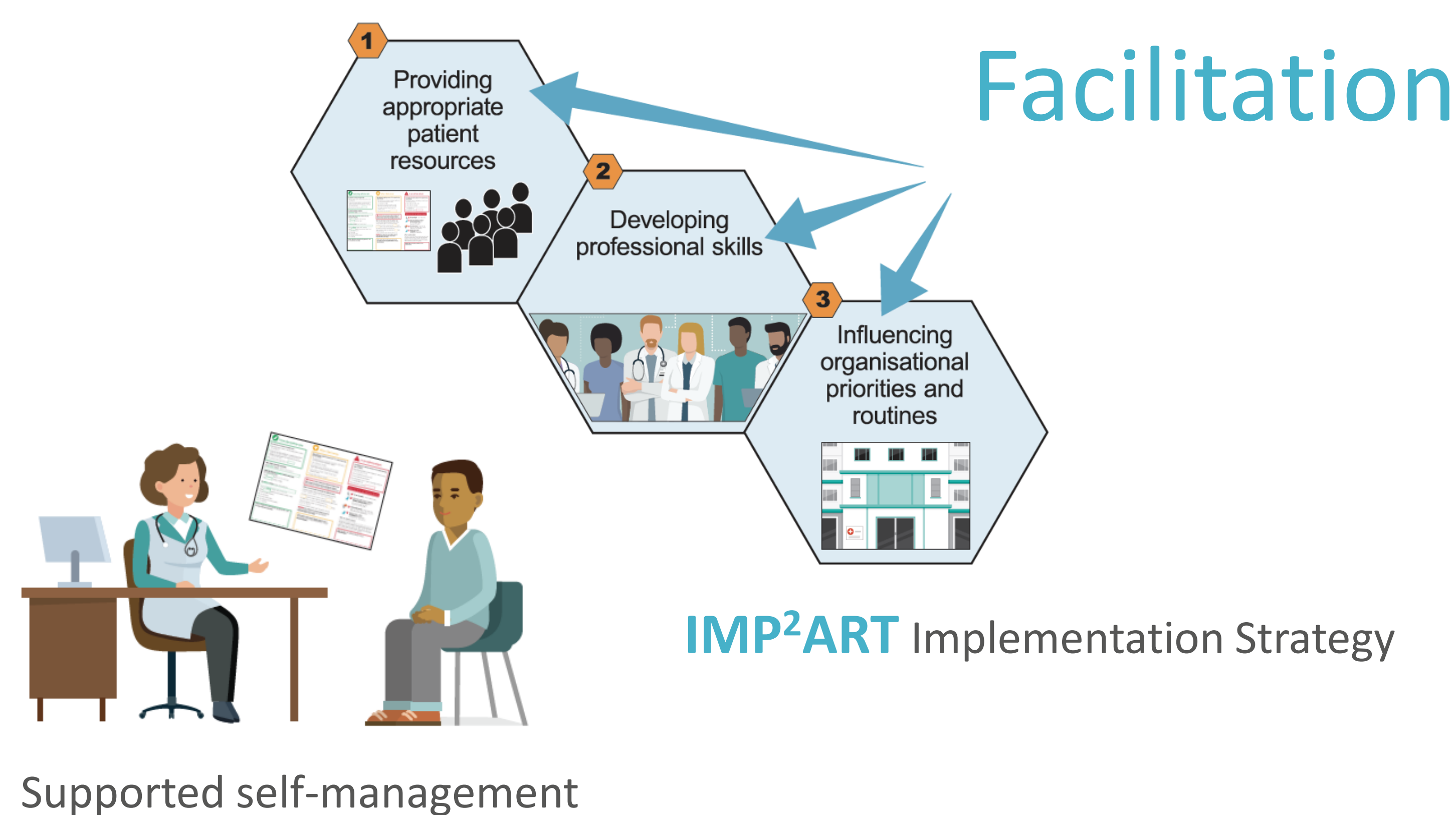
Ongoing facilitator support included an online discussion forum and regular meetings with core activities including troubleshooting, sharing experiences, peer learning and support (see Table 1).

**Table 1: Facilitator support and shared learning themes**

<b>Training and support</b>	<ul style="list-style-type: none"> <li>• Defining the facilitator role</li> <li>• Facilitation schedule &amp; flexibility</li> <li>• IMP<sup>2</sup>ART strategy and resources &amp; adapting to individual practice need</li> <li>• Adaptation from in-person to remote facilitation &amp; developing confidence with this</li> </ul>
<b>Facilitation activity</b>	<ul style="list-style-type: none"> <li>• Workshop delivery</li> <li>• Engaging staff during the workshop</li> <li>• Interpreting audit and feedback data for application to practice</li> <li>• Creating a core IMP<sup>2</sup>ART group within the practice</li> <li>• Creativity and approaches for challenging situations/topics</li> <li>• Ongoing engagement</li> <li>• Responding to individual practice support needs</li> </ul>
<b>Management/supervision</b>	<ul style="list-style-type: none"> <li>• Onboarding</li> <li>• Practice allocation</li> <li>• Trial updates</li> </ul>

## Discussion

The framework enabled facilitators to structure their support for the practices for consistency, but crucially allowed them flexibility to adapt to individual practices and the contexts within which they were implementing the IMP<sup>2</sup>ART strategy.



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