

#AskAboutAsthma Campaign

Partner Toolkit

#AskAboutAsthma is back! Keeping children's asthma under control is particularly important this year due to the coronavirus and any potential second wave.

2020 campaign theme is **#AskAboutAsthma: Back to school in the time of Covid-19**

Please note this is not a formal health promotion campaign under the Community Pharmacy Contractual Framework, you do not have to complete any audits or send in any returns.



Introduction

Asthma is the most common long-term medical condition affecting children and young people (CYP). 1 in 10 CYP are affected by the condition, meaning 240,000 CYP have asthma in London. Many have badly managed asthma – to the extent that 4,000 are admitted to hospital with asthma every year and 170 have such a severe episode that they require admission to intensive care.

At the worst end of the spectrum, children die of this disease in the capital every year. Poorly controlled asthma affects every aspect of children's lives – their ability to learn, enjoy time outside school with friends or take part in sport. It affects their time with their families and how they sleep.

There are [tools and guidance](#) that exist to help healthcare professionals and others treat and manage asthma and support patients to self-care. We do not have to wait for new medicines or a cure for asthma: we need to educate and support our workforce to use these tools to achieve improved outcomes. However, making a significant change requires agreement and coordinated effort.

We are asking professionals to ensure they implement simple measures to improve care and management of CYP with asthma. We have also asked NHS organisations to commit to reducing their contribution to air pollution, recognising the role played by air quality in triggering attacks. Our [toolkit on air pollution reduction](#) for NHS trusts describes simple and free changes NHS organisations can make.

Our Aims

The [#AskAboutAsthma](#) campaign encourages children and young people and their families, and those involved in their care, to ensure three simple and effective measures are in place to help them control their asthma:

1. [A written asthma action plan](#) drawn up between a clinician and asthma sufferer means people are four times less likely to have to go to hospital for their asthma. Only 28-48% of CYP with asthma in London have an asthma plan
2. [Using inhalers effectively](#) less than ¼ of CYP have any form of instruction in how to use their inhalers – meaning they may not be getting the full benefit of their asthma medication
3. [An annual asthma review](#) (as a minimum) to ensure effective management of the condition

We also look at air quality and the impact it has on lung health.

Key Facts

(see [asthma case for change](#) for more details)

- In 2018 London Ambulance Services (LAS) attended 2,737 children for asthma and 9,855 children for breathlessness
- London has a higher rate of illness and death in children and young people because of asthma compared to other European countries
- It is one of the top three causes of emergency admission to hospital (4,000 in London each year). 75% of these admissions would be avoidable through the implementation of simple interventions
- Nearly half of these children have had an asthma attack in the previous year and 30% have had daytime symptoms in the previous week – however only a fraction has a personalised asthma plan on how their asthma should be managed
- 170 children were admitted to intensive care in 2016/17, with an average length of stay of 3 days. This represents a spend of over £1million on intensive care for this population
- Nitrogen dioxide, particulate matter and other forms of air pollution are known triggers for asthma and poor health more widely, particularly in children
- Children die of asthma in London each year; 90% of these deaths are preventable. These children should have gone on to lead full and productive lives.
- While Covid-19 is not thought to be a particular risk for CYP with asthma, it makes good asthma control and avoidance of unnecessary ED attendances more important than ever.

#AskAboutAsthma for Pharmacy

The campaign identifies questions that staff should ask of their organisations to help optimise asthma care for children and young people. Questions for pharmacy staff are below.

Pharmacists should:

ASK if CYP or parents/carers understand how to use their medications and offer Medicines Use Reviews or the new medicine service if appropriate*

ASK about inhaler technique checks or training to all CYP when they collect inhalers

ASK if they have an asthma action plan and, if not, suggest they see their GP

ASK about and offer flu vaccination to CYP and their families

ASK about smoking and refer/ offer stop smoking services to CYP or parents/carers

* Reviews with parents for younger children: PSNC guidance states the patient must be competent to give consent to receive the service and to share information as required by the consent arrangements in order to be eligible to receive the service. There is no minimum age, but pharmacists will know that the younger the child, the greater the likelihood is that they would not be competent.

How can you help

The 2020 [#AskAboutAsthma](#) campaign runs from 14 - 20 September to raise awareness of the measures that should be taken to manage all children and young people (CYP) with asthma. It aims to ensure that existing [asthma standards](#) and [ambitions](#) are met across London and that no more children die from preventable asthma attacks.

Follow us [@HealthyLDN](#) and please use **#AskAboutAsthma**

Resources

Our [communication toolkit](#) includes resources to help you, including posters for your pharmacy which can be printed as well as a short video for pharmacists.

Social media resources

Social media is a great way to spread the word and support our campaign. On the following pages you will find suggested copy for posts that you can use on your social media channels.

Please do not forget to:

Use **#AskAboutAsthma** when communicating messages in your social media channels, especially on Twitter. We will retweet and like any messages you use.

Follow us and share and retweet:

Twitter [@HealthyLDN](https://twitter.com/HealthyLDN)

Facebook [@HealthyLDN](https://www.facebook.com/HealthyLDN)

Instagram [healthy_ldn](https://www.instagram.com/healthy_ldn)

LinkedIn [healthy-london-partnership](https://www.linkedin.com/company/healthy-london-partnership)

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Suggested generic social media messages

1. This week, for the fourth year running, @Healthy_LDN and #NHS_Idn supported by @MayorofLondon are running a campaign #AskAboutAsthma to help improve the lives of those living with asthma in the capital. #AskAboutAsthma
2. The NHS are calling on parents to keep asthma medicine close at hand this week, with children up to three times more likely to need medical help as the school year starts. Avoiding ED is even more important this year with Covid-19 #AskAboutAsthma
3. One in ten young people has asthma, with spikes in demand for help from GPs and hospitals in the weeks after school holidays. With Covid-19 it's even more important to control asthma and stay out of hospital. #AskAboutAsthma
4. Three simple steps save lives, an asthma management plan, being able to use an inhaler and having an annual asthma review. #AskAboutAsthma
5. #Airpollution is associated with the development and worsening of asthma in children. Children are more at risk from the effects of pollution because they have faster breathing rates and their lungs are still developing. #AskAboutAsthma
6. If a child has a personalised asthma action plan, they are four times less likely to have an asthma attack that requires emergency hospital treatment. Ask your GP for an asthma plan. #AskAboutAsthma
7. Your asthma action plan will tell you everything you need to know about looking after your asthma in one place. Ask your GP for an asthma plan. #AskAboutAsthma
8. Ask your GP for an annual review to help manage your asthma. #AskAboutAsthma
9. 1 in 10 children and young people in London have #asthma but less than half of these have an asthma management plan or know how to use their inhaler correctly. Ask your GP or health professional for help using your inhaler. #AskAboutAsthma
10. Ask your pharmacist to show you how to use your inhaler properly, and you don't even need to make an appointment

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Suggested generic social media messages

11. Good inhaler technique can make a big difference to how well people manage their asthma. It could also mean that they don't need to be prescribed higher doses of medication. #AskAboutAsthma
12. Living with asthma can take a big toll on mental health, especially in these difficult times. Find out where to get support and advice to stop stress triggering your asthma. #AskAboutAsthma www.asthma.org.uk

London asthma standards for ICSs/CCGs and place-based teams

The [London asthma standards](#) describe the level of care to which every organisation caring for children and young people with asthma should aspire.

The [London asthma toolkit](#) contains numerous resources to support you in implementing the standards.

The [London asthma standards](#) that are most relevant for ICSs/CCGs and place-based teams are:

All organisations/services must have a named lead responsible and accountable for asthma (which includes children and young people).

There are systems in place to minimise prescription and drug administration errors. This includes:

- Utilising current systems to monitor adherence to national and local prescribing guidelines.
- Development or identifying appropriate education and training resources to support adherence to prescribing guidelines.
- Utilising current systems to monitor near misses and medication errors in primary and secondary care settings
- Identify, monitor, and manage through an alert system to clinicians the numbers of prescriptions for prednisolone, inhaled steroids, 10 or more preventer inhalers in a year, children with asthma and flu jab uptake.
- Identify and manage CYP prescribed inhalers at doses higher than recommended in product licence.
- Use MURs and new medicine reviews to promote medicines optimisation including inhaler technique assessment for CYP.

Note: Reviews with parents for younger children: PSNC guidance states the patient must be competent to give consent to receive the service and to share information as required by the consent arrangements in order to be eligible to receive the service. There is no minimum age, but pharmacists will know that the younger the child, the greater the likelihood is that they would not be competent.

- Use CCG medicines management teams to develop local prescribing guidelines to support evidenced based care for CYP.
- Support coordination between CCG medicine management pharmacists, secondary care pharmacists and community pharmacists to monitor adherence to national and local prescribing guidelines.
- Use community pharmacists to monitor and promote medicines optimisations initiatives through the application of clinical audits and health promotion campaigns within the community pharmacy contractual framework.

Please see the *Do you meet the standards* section on the [London asthma toolkit](#).

London's ambitions for asthma care for children and young people

Each organisation (primary and community care, acute care, pharmacy, schools) will have a clear named lead who will be responsible and accountable for asthma (which includes children and young people) and the delivery of the following:

As a child with asthma:

PROACTIVE CARE



I should have access to a **named set of professionals working in a network**.



I will **be supported to manage my own asthma** so I am able to lead a life free from symptoms.



I will grow up in an **environment** that has **clean air that is smoke free**.

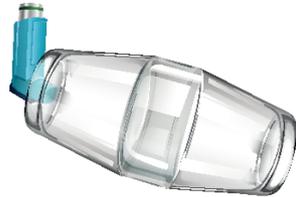


I will have access to an **environment** that is **rich with opportunities to exercise**.

ACCESSIBLE CARE



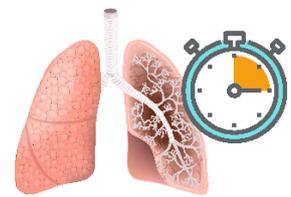
I will have my **diagnosis** and severity of wheeze established quickly.



I will have **prompt access to my inhaler device** and other medicines and asthma care and advice everywhere I go.



I will have access to **immediate medical care, advice and medicines** in an emergency.



I will have access to **high quality, evidence based care** whenever I need it.

CO-ORDINATED CARE



My carer and I will know how to manage my asthma with the help of a written **asthma management plan**.



I will have a **regular structured review**



I will have a **package of care** which meets all my needs including my educational health and well-being.



I will expect all professionals involved in my care will **share clinical information** to **ensure my care is seamless**.



I will move safely into **adult services** when I grow up.