Summary

At the start of the Covid pandemic, asthma biologic homecare continuation following initial hospital initiation was well established across Yorkshire and Humber. However, initiation of treatment safely in a patient’s home was not part of UK practice.

To enable continued initiation of treatment for new patients during the Covid pandemic, the Yorkshire Asthma Network led on pathways to enable new patients to be started safely on asthma biologic treatment in their homes. This involved working with industry partners to develop new services, supporting policies, home initiation packages and patient information.

Aims and Objectives

To develop new pathways allowing the safe commencement of therapies to ‘new starters’ in their own homes.

Reasons for implementing your initiative

There was a need, within the Yorkshire region, to redesign services to improve access to asthma biologic treatment. Enabling patients to initiate asthma biologics at home would help address the current variation and inequality in access to treatment. This aligns with regional strategy to increase out of hospital care. However, to ensure that home treatment is safe, it is recognised that necessary assessment, monitoring and support need to be in place.

By implementing the at home service, the Yorkshire Network could reduce:

- the need for patients to travel to hubs
- healthcare inequities imposed by geography or access to transport,
- waiting lists to start therapy
- the risk of patient exposure to Covid infection
HOW YOU IMPLEMENTED THE INITIATIVE

> Pharmaceutical companies and homecare providers supported development of policies and packages to allow the safe initiation outside of hospital.

> A homecare start policy was developed to ensure patients selected were confident in the process, considered safe, and had a suitable home environment.

> An enhanced observation protocol was adopted where two hourly patient observations were taken for first and second doses.

> Patients were trained to administer and provided with necessary information.

KEY FINDINGS

1. With the correct risk control in place, initiation of biologic treatments at home can be effective to improve equity in access.

2. Once appropriate patients are referred, treatment can start in 2-4 weeks.

3. Additional benefits included a V.A.T saving, reduced requirement for hospital appointments, staff resource and clinic space.

4. There was a high level of patient satisfaction and empowerment.

KEY LEARNING POINTS

> There is a need to strengthen the Yorkshire Severe Asthma Network, recruit more asthma lead, upskill regional centres and be mindful of regional geography.

> Robust policies and procedures need to be in place.

> There is a need to work with an experienced nationally commissioned homecare Provider Scheme.

> There are huge disparities regarding levels of awareness and understanding of asthma within certain populations, especially for minority communities.

Contacts

Professor Ian Sabroe. Sheffield Teaching NHS FT/ Yorkshire Asthma Network. i.sabroe@nhs.net

Harriet Smith; Yorkshire and Humber AHSN. Harriet.smith@yhahsn.com