

# **How to set up an asthma network**

## **What is an asthma network?**

An asthma network is a forum which brings together a community of health and social care professionals, commissioners, patients and parents/carers to work in partnership with the shared goal of improving care for children and young people (CYP) with asthma. Members are able to collaborate across organisations and patient pathways to identify gaps in care through benchmarking and taking collective action to integrate care, drive improvement and outcomes.

**The core features of a successful network are:**

* A common purpose, shared vision and agreed priorities for network members to take back to their organisations
* A safe forum to enable sustainable improvement to take place at a local level
* An expert resource
* An opportunity to share best practice and influence delivery of care for CYP, to develop educational opportunities for health professionals, and to carry out research and audit

**Setting up an asthma network**

The network should act as a forum for leading the planning, provision, monitoring and quality improvement of effective asthma services. It should be a collaboration between all relevant stakeholders that provide the expertise and impetus for the development of future services across an area.

Initial steps include:

* Establish a clear purpose, vision and strategy. Be specific – what is the network aiming to achieve and why?
* Identify essential roles: a Chair and an administrator to coordinate the network, organise meetings and take minutes
* Consider costs, such as meeting space (although most meetings will now take place online) and administrative support
* Use stakeholder analysis identify the key people who need to be involved
* Consider what future care in your area might look like for CYP with asthma.
* Determine how to measure the effectiveness and impact of the network and any of its projects.

Note that all these points will be refined by the network itself once it is formed.

**Network members**

Members should come from across the pathway and include primary, community and specialist care, public health and local authority representatives, schools, health commissioners and CYP with asthma working in active partnership.

The group should include:

* CYP and/or parent/carer representatives – to provide experience of services to inform improvement plans and help with any co-design work.
* Primary and community care professionals, including GPs, practice nurses and community and GP surgery based pharmacists
* Hospital staff, including secondary and tertiary care doctors and trainees, nurses and pharmacists
* Clinical nurse specialists
* Allied Health Professionals, including physiotherapists
* Local authority colleagues from all boroughs covered by the network, from departments including air quality/pollution, public health, schools, school nursing, health visiting
* Commissioners working at ICS and place based level

**Potential first steps**

* Define priorities based on the needs of the local population
* Develop a workplan incorporating local and national priorities
* Provide a forum to ensure that CYP with asthma and their families can inform care providers of their experiences and a means of ensuring that this information is used to inform commissioning decisions and service redesign
* Look at data that is available through that national CYP asthma dashboard and any local data systems to develop a system of benchmarking and monitoring progress against the priorities identified.

The checklist below was developed by Diabetes UK and provides some helpful tips.

Diabetes UK: Do’s and Don’ts of delivering a network?

✘ DON’T be deterred by a lack of funding. A good network can function on a limited budget where the main costs are simply members’ time and a meeting space.

✘ DON’T hold too many meetings or you risk burn out. Ask members for their input on what a suitable number of meetings should be.

✔ DO recognise that leadership should be shared in a network and all members should feel they have a voice. Empower members by giving them real and meaningful responsibilities.

✔ DO allow for challenging discussions and evolving aims and goals. Try not to over structure or control the network.

✔ DO keep in mind how much time and effort members are able to dedicate to the group when setting goals. Think about the most efficient ways to use their time and energy.

✔ DO celebrate success. Acknowledge individual and group achievements, no matter how small.[[1]](#footnote-1)

Diabetes UK also have a useful network effectiveness scorecard 1

**Useful resources**

[NHS Networks](https://www.networks.nhs.uk/) – resource for all types of networks

[Developing and managing effective networks to support quality improvement in healthcare The Health Foundation March 2014](http://www.health.org.uk/publication/effective-networks-improvement#sthash.qLD9e6Wv.dpuf): A review of literature about effective networks and what makes a successful improvement network.

1. Diabetes UK (2015) *How to deliver a successful network for diabetes care* [*https://www.diabetes.org.uk/Professionals/Resources/shared-practice/Networks/*](https://www.diabetes.org.uk/Professionals/Resources/shared-practice/Networks/) [↑](#footnote-ref-1)