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Title

Coach McLungsSM in Primary Care: How to Exceed Practice Recruitment Goals during COVID-19

Priority 1 (Research Category)

Dissemination and implementation research

Presenters

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Abstract

Context: Coach McLungsSM is an interactive, digital, health coaching experience that engages patients, caregivers, and providers in a tailored conversation about asthma and promotes shared decision making (SDM) in creating a plan of care at the point of care. Through pilot testing in primary and acute care settings, Coach McLungsSM has been proven to increase asthma knowledge scores and promote SDM with a 100% user satisfaction rating. Objective: To disseminate this successful application, we have received funding to implement Coach McLungsSM across the primary care division of a large healthcare system with a goal of recruiting 15 pediatric and family medicine practices. Study Design and Analysis: The practices will be randomized into a stepped-wedge study design with a baseline control period and 5 intervention steps over 3 years. Setting: Pediatric and family medicine practices within a large, integrated, nonprofit healthcare system based in Charlotte, NC. Population Studied: Patients between 7-17 years old with an asthma diagnosis in the previous 3 years. Intervention: Coach McLungsSM was first promoted through internal and external media outlets including news briefs then announced through executive leadership meetings and primary care department newsletters. Next, a Data Warehouse search identified pediatric and family medicine practices with at least 50 eligible patients. The research team considered practice characteristics and asked service line leadership for their input into practice selection. Then, prospective practices were emailed about Coach McLungsSM to elicit their interest in learning more about the study opportunity, then an introduction presentation was scheduled if interested. To be included in the randomization, scheduling of the presentation had to occur prior to the 12/17/2021 deadline. Outcome Measures: Numbers of practices. Results: 50 pediatric and family medicine practices were identified as having a sufficient number of asthma patients; 31 practices were emailed about Coach McLungsSM; 24 practices expressed interested in learning more; 22 practices scheduled an introduction presentation before the deadline; 21 practices were randomized (1 practiced

closed between recruitment and randomization). Conclusions: Despite competing priorities during the COVID-19 pandemic along with a system-wide electronic medical record change, we exceeded our practice recruitment goal for Coach McLungsSM.