The mission of
ALLERGY & ASTHMA NETWORK

Is to end the needless death and suffering due to asthma, allergies and related conditions through outreach, education, advocacy and research.
Meet Our Speakers

Andrea M. Jensen, CHES®, AE-C
Asthma Program Coordinator
Utah County Department of Health
Provo, Utah

Gayle Higgins, MSN, PNP-BC, AE-C
Pediatric Nurse Practitioner
Education Plus
Philadelphia, PA

Asthma

- 25 MILLION Americans diagnosed
- 1 in 10 CHILDREN
- $80 BILLION annual costs
- 3,168 DEATHS annually
- 13.8 MILLION missed school days per year
- 14.2 MILLION missed work days per year
- 3 in 5 limit physical activity
- 71% misuse inhalers
- 1 in 5 CANNOT AFFORD medications

AllergyAsthmaNetwork.org
Social Determinants of Health

Disparities in Asthma
Social Determinants of Health

- Economic Stability
- Health Care
- Social Community Context
- Education
- Neighborhood & Environment

Imagine....

- No Health Insurance
- No family support
- Worried about money
Add to those worries a child with asthma . . .

- Do they have their inhaler?
- Do they need to go to the ER?
- Why do they ALWAYS get sick?
- Can I find a babysitter?
- Will they be ok at school?
- Should I go to work?
- Why does this keep happening?
- Are they breathing ok?

Asthma Visit Today

- Vital signs
- Meet with HCP
- Asthma assessment
- Refills (if needed)
- Written asthma action plan
- Sent to schedule follow up
- Lasts approximately 15 minutes
What the Provider Sees and Hears

- A healthy looking child
- Everything is fine at home
- He takes his medicine every day
- Is anyone smoking at home? - No
- Is he coughing at night - Yes every night
- How often is he using his albuterol inhaler - Every day
- Is he using a spacer? - What’s that?

Limits of Health Care Provider

- Time limit on visits
- RVU’s – need to see so many patients a day
- COVID has limited staff in office
- No time to provide education
What is Missing?

- Time for education
- Time to review asthma triggers
- Time to ask what is happening in the home
- Address other issues that may be affecting the family

Who Can Do That?

- Team member:
  - HCP
  - Office nurse
  - Medical assistant
  - Social work

- Community Health Worker
- Home Health Educator
What an Ideal Visit Can Do

- Help family with other issues that can impede caring for the child
- Empowering the family through education
- Education reinforced at each visit
- Support patient emotionally and physically

What an Ideal Visit Takes

- Listen to the family
- Take your time with the child and their family
- Lots of praise for a job well done
- Treat them as equals
- Provide educational materials in their first language
- Address other issues (nutritional, social or educational issues)
“The connection between health and the dwelling of the population is one of the most important that exist.”

*Florence Nightingale*
Relationship Between the Provider & Family

- **Professional Relationship**: Provider likes the Healthcare Provider (HCP)
- **Parent not always listening to the Healthcare Provider**: Provider is wondering if the parent is saying exactly what is going on at home
- **Difficult to get parent to focus during the visit**: Difficulty contacting HCP through office channels

Why Are Home Visits Important in Asthma Care

- Helps provider to know what is going on in the home
- Allows the provider to refer the family to needed resources
- The home visitor/CHW acts as the eyes and ears of the provider
- The home visitor/CHW is the liaison between family and provider
- Education allows family to care for child with asthma and feel empowered
- Decrease in ED visits/hospitalizations for asthma, improved medication compliance and improved family life
Partnerships

Provider

Diagnose & prescribe

Public Health Educator or Community Health Worker

Reinforce & Educate

Who are Community Health Workers? (CHW’s?)

- Trusted member of the community
- Member of the health team
- Knows the communities they serve
- Are culturally sensitive
How do Asthma Home Visit Programs Work?

Where the Home Visitor/CHW Comes In

- Liaison between family and HCP
- Eyes and ears for the HCP
- Family confides in them
- Home visitor works with the family and HCP to see what family needs to care for the child’s asthma
Relationship Between Home Visitor and Client

• Somebody they can trust
• Somebody who will listen to them
• Somebody who will help them
• Somebody who will empower them

Home Visiting Programs Address the Barriers that Families are Facing

Non-compliance – intentional or unintentional
Poor perception of what happens with asthma
Cost of prescriptions
Home environment
Transportation
Language/illiteracy

5 Barriers to Success This Year (and How to Avoid Them)
25 CDC Funded Asthma Program sites

All states in the US (except North and South Dakota) have an asthma program. They can be local, state, public health department, hospital based, coalition based.

https://www.cdc.gov/asthma/contacts/default.htm

Room2Breathe Asthma Home Visiting Program

Education Plus Health operates the Room2Breathe Program in partnership with the Philadelphia Department of Public Health. Launched in 2016, the program is currently enroled within Temple Pediatrics and St. Christopher's Center for the Urban Child. A community health worker is enroled within each of these pediatric practices to serve their patients who meet the eligibility criteria with one important hospitalization over the last year or two emergency room visits due to asthma. Community health workers conduct up to seven home visits with eligible families over a 12-month period helping them to manage their asthma in partnership with their doctor and ultimately reduce visits to the hospital because of asthma.

Room2Breathe community health workers:
- Teach families about asthma self-management
- Educate families about reducing asthma triggers in the home
- Provide families with supplies to help control triggers in the home
- Keep practitioners updated by sharing summary reports
- Refer families to pest management services as needed
- Connect families to community-based agencies to address the social
“Align services between **public health** and **health care sectors** to provide comprehensive asthma control services.”

1. In-depth self-management education
2. Home-based trigger reduction
Target Population: Persistent/Uncontrolled Asthma

- ED Visit and/or Hospitalization within the Last Year
- Prednisone or Other Oral Steroid Within The Last Year
- Asthma Control Test less than 19 for Ages 4+ or a TRACK of less than 80

We help anyone with persistent/controlled asthma

- No income requirements
- No age limit

*Every state/program is different*
Sending a Referral

PATIENTS GIVE CONSENT
Consent may be verbal confirmation or a signature on a release form.
Email andreaj@utahcounty.gov for a sample release form

SEND INFORMATION (NEW FAX!)
Send an encrypted email to Andrea Jensen andreaj@utahcounty.gov
OR
Send a fax to Utah Asthma Home Visiting Program
801-851-7508

Close the Referral Loop

WE WILL SEND A REPORT
A report will be sent back to you when the patient either:

- Has Completed the Program
- OR
- Declines Services
**We provide virtual “home” visits during the pandemic**
Visit 1 – In depth asthma education

- Physiology
- Asthma triggers (3 pages)
### Controlled vs Uncontrolled Asthma

#### Controlled Asthma
- You sleep through the night without asthma symptoms
- You have no trouble with your daily activities or exercising

#### Uncontrolled Asthma
- You take your rescue inhaler more than 2 times per week
- You wake up at night with asthma symptoms more than 2 times a month
- You refill your rescue inhaler more than 2 times per year

*The Rules of Two® is a registered trademark of Baylor Health Care System.*

### Visit 1

#### Controller vs rescue/reliever

**Long-Term Controller Medication**
- Reduces swelling in the airways
- Must be used EVERY day to help prevent an asthma attack
- Rinse mouth after use

**Quick Relief Medication**
- Relaxes muscles around the airways
- Acts fast!

#### Inhaler poster

**Respiratory Treatments**
- [Image of various inhalers and medications]

**DISEASE STATES:**
- = ASTHMA
- = COPD

Reviewed by Dennis Williams, PharmD

The Allergy & Asthma Network is a national nonprofit that works to improve the quality of life for people with asthma, allergies and related diseases by educating both the public and health care professionals. Through outreach, education, advocacy and research, the Network is dedicated to helping people living with asthma, allergies and related diseases to take control of their health and reduce the associated suffering due to asthma, allergies and related conditions.
Spacers and nebulizers  Evaluate inhaler technique

When To Go To the ER/Call 911

**Emergency Symptoms**

- Retractions
- Lips or fingernails become a purple/blue color
- Can’t say more than a short phrase because of shortness of breath
- No improvement after using rescue inhaler
- Head bobbing in infants

Face becomes a pale, gray color
Trained through the National Center for Healthy Housing

Homework!

- Dust Mites
  - Dust mite covers on mattresses, pillows, and cushions in the bedroom, living room, and any area where someone sleeps or spends a lot of time.
  - Wash bedding covers, sheets, and comforters at least once a week in hot water with detergent and bleach.
- Cleaning
  - Change and vacuum bedding regularly in the bedroom, living room, and any area where someone sleeps or spends a lot of time.
  - Wash bedding covers, sheets, and comforters at least once a week in hot water with detergent and bleach.
  - Clean all washable items in the bedroom, living room, and any area where someone sleeps or spends a lot of time.
- Mold
  - Mold is a form of fungi that can grow on damp, wet surfaces. Mold can be a problem in homes where there is moisture or water damage.
  - Mold can grow on walls, ceilings, floors, and other surfaces.
- Pets
  - Pets are allowed in the home.
- Strong Odors
  - Strong odors can be caused by many different things, including smoking, cooking, and cleaning products.

Plan to remove asthma triggers in your home:

<table>
<thead>
<tr>
<th>Asthma Trigger</th>
<th>Home Intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tobacco Smoke</td>
<td>Smoke-free home.</td>
</tr>
<tr>
<td>Strong Odors</td>
<td>Odor-busting steps.</td>
</tr>
<tr>
<td>Pets</td>
<td>Pet-friendly rules.</td>
</tr>
</tbody>
</table>
Visit 2

Where to find dust mites

Visit 2

Strong Odors

Are you exposed to any smokers or vapers?
Do you know the MERV rating on your filter?

Visit 2

Pets
Allergens found in: Skin flakes or dander, Hair, Urine, Saliva

Mold
Mold spores in the environment grow when they find a water source.
Deliver the supplies and run!

Trigger Reduction Incentives (grant funded)
Partner with Housing Agencies

- Habitat for Humanity of Utah County
- Housing Authority of Utah County
- Green & Healthy Homes Initiative | Salt Lake
- HUD EXCHANGE

CRITICAL HOME REPAIR & HOUSING REHABILITATION PROGRAM

VISIT 3
Discuss progress on controlling your asthma triggers or reducing triggers
Change inhalers?
Start a biologic?
Make home repairs?
Review inhaler technique

CALL 1
You will get a phone call 8 months after Visit 3 to talk about questions or concerns

CALL 2
You will get a phone call 1 year after Visit 3 to talk about questions or concerns
Outcomes

Reduces Unwanted and Costly Events
12 Months After Completing the Program

- **80% decline** in average missed work days.
- **51% decline** in average missed school days.
- **41% reduction** in average unplanned doctor visits.
- **51% reduction** in episodes requiring an oral systemic corticosteroid.
- **75% reduction** in asthma-related ED visits.
- **87% reduction** in asthma-related hospitalizations.

January 2021

Administrative Problems

- Exceeding budget for mileage, time
- Need more funding, more staff
- Last minute cancellations
- No-shows
- Just want free incentives
- Virtual visits during pandemic
Barriers

- No tablet/laptop
- Client moved
- Phone is disconnected
- No response to contact attempts

Potential Barriers

- Crime/violent neighborhoods
- Having asthma attacks in homes with triggers
- Outside of house matches inside
- Need to pre-medicate
- Getting sick from families
Partnerships

- Local schools
- Colleges
- State/local asthma programs

- Commercial Insurances

[Logos for Asthma and Allergy Foundation of America, College of Allergy, Asthma & Immunology, Allergy & Asthma Network, American Lung Association, and Asthma Community Network.org]
References


Home Visits for Children with Asthma Reduce Medicaid Costs
Preventing Chronic Disease, 2020:17: E11
Erica T Marshall MPH, Jing Guo, PHD, Elizabeth Flood MPH, Megan T Sandel, MPH MD, Matthew Sador, MD, Jean M Zotter JD
Contact info

Andrea M. Jensen, CHES®, AE-C
Asthma Program Coordinator
Utah County Department of Health
Provo, Utah
AndreaJ@utahcounty.gov

Gayle Higgins, MSN, PNP-BC, AE-C
Pediatric Nurse Practitioner
Education Plus
Philadelphia, PA
gayle@educationplushealth.com
nuthatch61@gmail.com

QUESTIONS

We’ll get to as many questions as we can!
Join us for our next webinar –

Vaccines & COVID-19: Science-based Thoughts on the Long Haul

FEBRUARY 17, 2022
4:00 PM ET
Dr. Purvi Parikh
Dr. Doug Jones
Tonya Winders

Breathe Better Together

Allergy & Asthma Network

allergyasthmanetwork.org