

■ ■ Jersey City Medical Center
■ ■ Barnabas Health

Pediatric Asthma Case Management and Home Evaluations

Thursday, October 9th, 2014

Pediatric Asthma Case Management (PCAM)

The Pediatric Asthma Outreach Program focuses on:

- Asthma Education
- Home Evaluation

Pediatric Care and Asthma Management
Managing your Child's Asthma

"Some Olympic athletes have asthma. They take medicine and warm up before sports just like I do."

A Program Dedicated in Improving the
Asthma Management for our Pediatric Patients

Contact Our Confidential Line: 201-388-1290

WealthFromHealthNJ.org
@WealthHealthNJ
WealthfromHealthNJ

Jersey City Medical Center
Barnabas Health

Wealth from Health

Accomplishments

- 66 members enrolled
- Outreach to all public and private schools in Jersey City
- Developing and maintaining community partnerships
- Creating an effective and appropriate educational curriculum for our members
- Establishing a relationship with families before conducting a home evaluation
- School-based Asthma essay/short video contest
- Patient- family based education

Methodology

Emergency Department

- Daily ED pediatric asthma report
- 30-day readmission report
- Daily inpatient census report
- 18 months retrospective review of hospital discharges

Data Analysis

- Review and monitoring of daily reports and developing trends to develop actionable next steps

Project Partners

- Asthma Educators visit school nurses to enroll pediatric asthma patients
- Collaboration with Jersey City Board of Education
- Identified reporting and project partners

Asthma Educators

- Educate participants on Asthma Action Plans and environmental triggers
- Offer to do home assessment of environmental causes of asthma
- Provide patient and family education in both English & Spanish

Membership

- Pediatric Children (0-18)
- Parents/Guardians - Caregivers
- Reward Based Program





DEPT. OF HEALTH & HUMAN SERVICES - USA

For more information, visit <http://www.cdc.gov/healthyhomes> or <http://www.surgeongeneral.gov>.

Environmental House Call

PROBLEM		ROOM OR AREA													
		Exterior	Porch	Entryway	Living Room	Dining Room	Kitchen	Bedroom 1	Bedroom 2	Bedroom 3	Bathroom 1	Bathroom 2	Basement		
Deteriorated Paint	Walls														
	Windows, door, or trim														
	Pain chips on floor														
Soil with no Grass or Mulch															
Cockroaches															
Rodents															
Holes in Wall															
Mold/Mildew	Obvious source of moisture														
	No obvious source of moisture														
Water Damage: walls wet/newly stained															
Strong Musty Smell															
Natural Gas/Sewer Gas Smell															
Unvented gas Oven/Dryer/Heater															
Worn-out Carpeting															
Other:															
Other:															
Other:															
Other:															
Other:															

CEHRC: Community Environmental Health Resource Center (Revised 3/04)

ENVIRONMENTAL HOUSECALL CHECKLIST 3

ITEM		CHECK OFF/ NOTES
Booklets/ Written Information to Leave With Resident		
WfH Member Education as Appropriate		
Demonstration Materials	Recommended Readings	Actual Readings
Pulse Co-Oximeter	Carboxyhemoglobin Level/ Methemoglobin Level	
%SpO2	Optimal Reading Range 95 – 100%	
	Alert Range – Below 89%	
Perfusion Index (PI) <.02% to >20%	Optimal Reading – 0%	
	Alert Range – Above 8%	
Pulse Rate (PR)	Optimal Reading Range 60 – 100bpm	
	Alert Range – Below 60bpm & Above 100bpm	
Room Temperature		
Relative Humidity	Optimal Reading Range 30 – 50% ¹	
Bacharach Monoxor II	Alert Range – Above 35ppm	
Mattress Cover/Pillow Case		
Anti-Allergen Spray		
Dust Mite Laundry Additive		
Additional Resources		
Peak Flow Meter	Alert Range – Below Green Zone	

All Alert Range Readings should be reviewed by a clinical professional within 24 hours of original reading.

Challenges

- Identifying I.T. systems to report appropriately required universal measures
- Missed appointments
- Establishing convenient access to pediatric pulmonologist
- Establishing a curriculum that would work for appropriate ages (0-18)
- Establishing relationships with private school nurses
- Assuring consistent documentation in different care settings

Project Outcomes

- Asthma Questionnaires
- Asthma Treatment Plans
- Discharge Plans
- Reduce Pediatric ED Visits/ Admissions for Asthma
- Reduce Asthma Symptom Days
- Reduced Missed School Days/ Work Days for Parents
- Increase Home Evaluations/ Healthy Homes