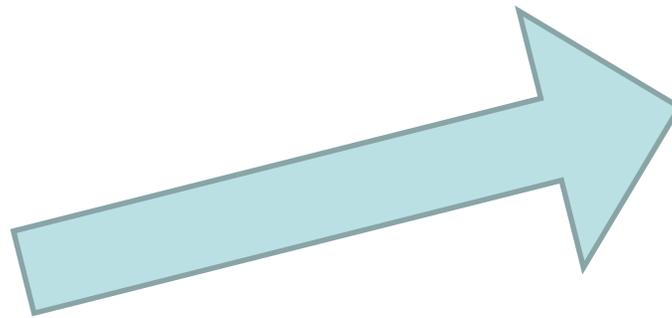


Pediatric Asthma Case Management and *Home Evaluation Program*

PCAM

At Jersey City Medical Center – BH



PCAM Activity Report

Quick Stats

As of April 30, 2015

- 152 children enrolled
 - DSRIP goal: 200 December 2015
 - JCMC-BH goal: 250 December 2015

Note: additional household asthmatic adults enrolled in Wealth from Health® outside of DSRIP

- 18 Home Evaluations completed
 - Building Trust
 - Incentives

PCAM Activity Report

Quick Stats

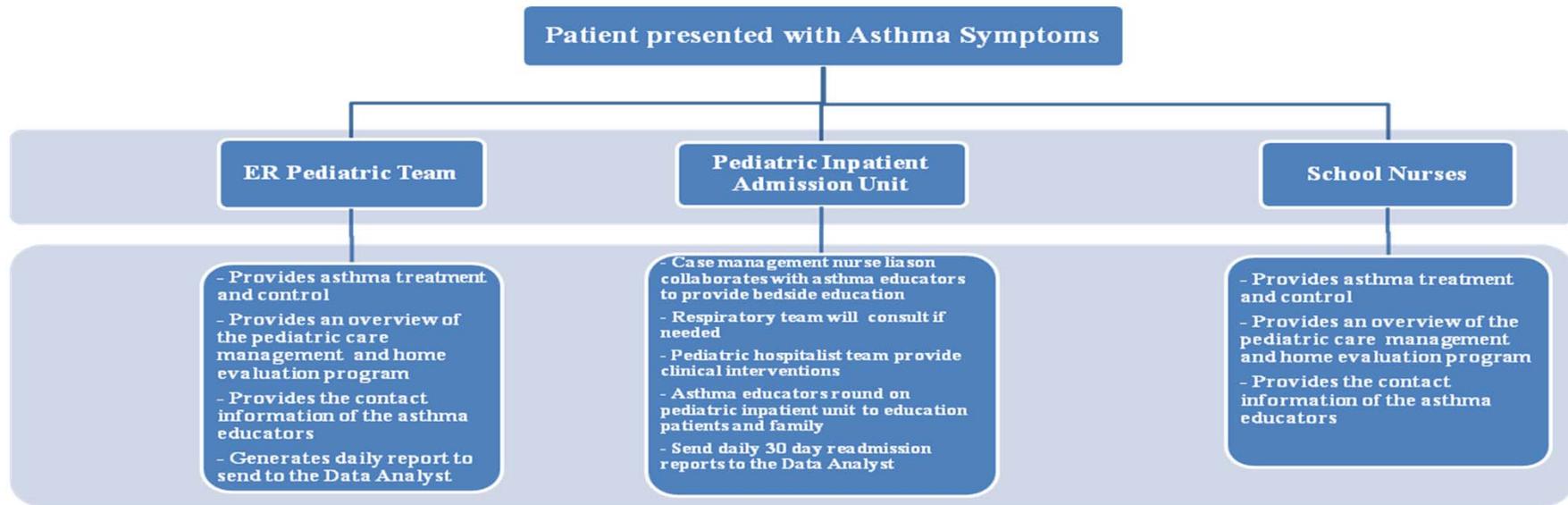
As of April 30, 2015

- School Outreach
 - 100+ School Nurse Relationships
 - Collaboration with all Jersey City public schools and some private schools
 - 17 Back to School Events/ PTO Meeting
 - Program Redesign (12+)
- Documentation review required for consistency across partners
 - Asthma Control Test
 - Asthma Action Plan

Environmental Housecall™

Asthma Trigger	Percentage of those who answered yes
Is this a smoke free home?	50.0%
Does the patient's asthma worsen when around pets?	68.8%
Are chemicals or products with strong odors (such as cleaners, paints, air fresheners) present?	37.5%
Are there filters present in the heating and cooling systems?	18.8%
Does the heating system use a fuel burning appliance (such as an oil or gas furnace)?	0.0%
Are supplemental heat sources such as space heaters utilized?	6.3%
Is there an accumulation of dust on the air conditioners?	50.0%
Are stuffed toys present?	50.0%
Is there evidence of water damage, moisture, or leaks (such as damp carpet or leaky plumbing)?	25.0%
Is mold or mildew present (in the bathroom or tub, shower, wall, or windows)?	87.5%
Is standing water present (such as refrigerator drip pans, air conditioner drip pans, or house plants?)	12.5%
Are humidifiers utilized in the home?	37.5%
Do mattress and pillows have allergen-proof covering?	12.5%
Are rooms properly ventilated?	6.3%
Is there evidence of cockroaches and/or rodents?	6.3%
Are there food crumbs or open unsealed food around the house?	0.0%
Are there holes or gaps between construction materials and pipes that could allow pests to enter the house?	6.3%
Can the flooring be improved?	18.8%
Odors	31.3%
Temperature or humidity problems	62.5%
Headache, lethargy, nausea, drowsiness, and dizziness	0.0%
Swelling, itching, or irritated eyes, nose, or throat; congestion	0.0%
Cough, congestion, chest tightness, shortness of breath, fever, chills, or fatigue	12.5%
Diagnosed infection or clusters of serious health problems	0.0%

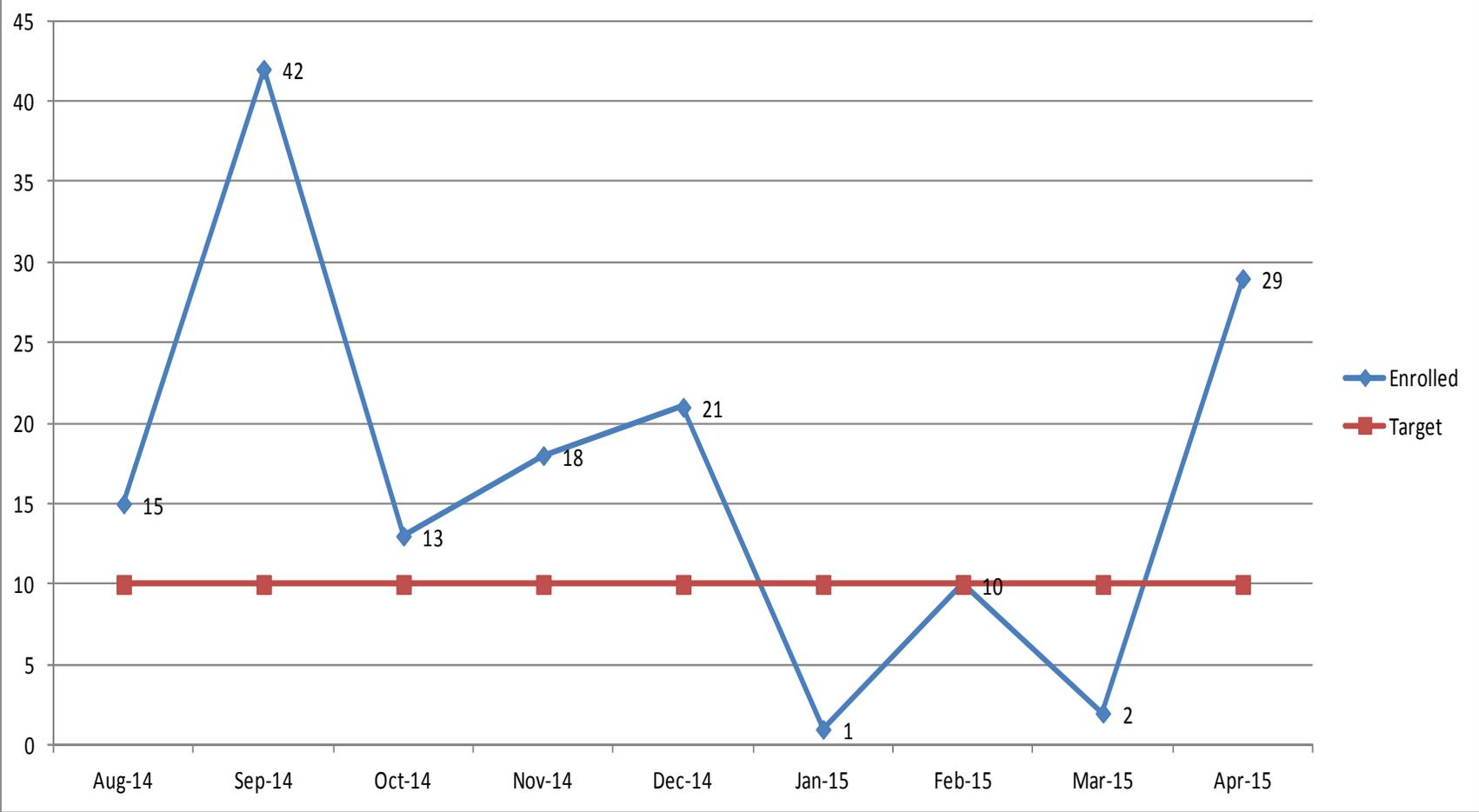
Full Implementation of Program Cycle Development



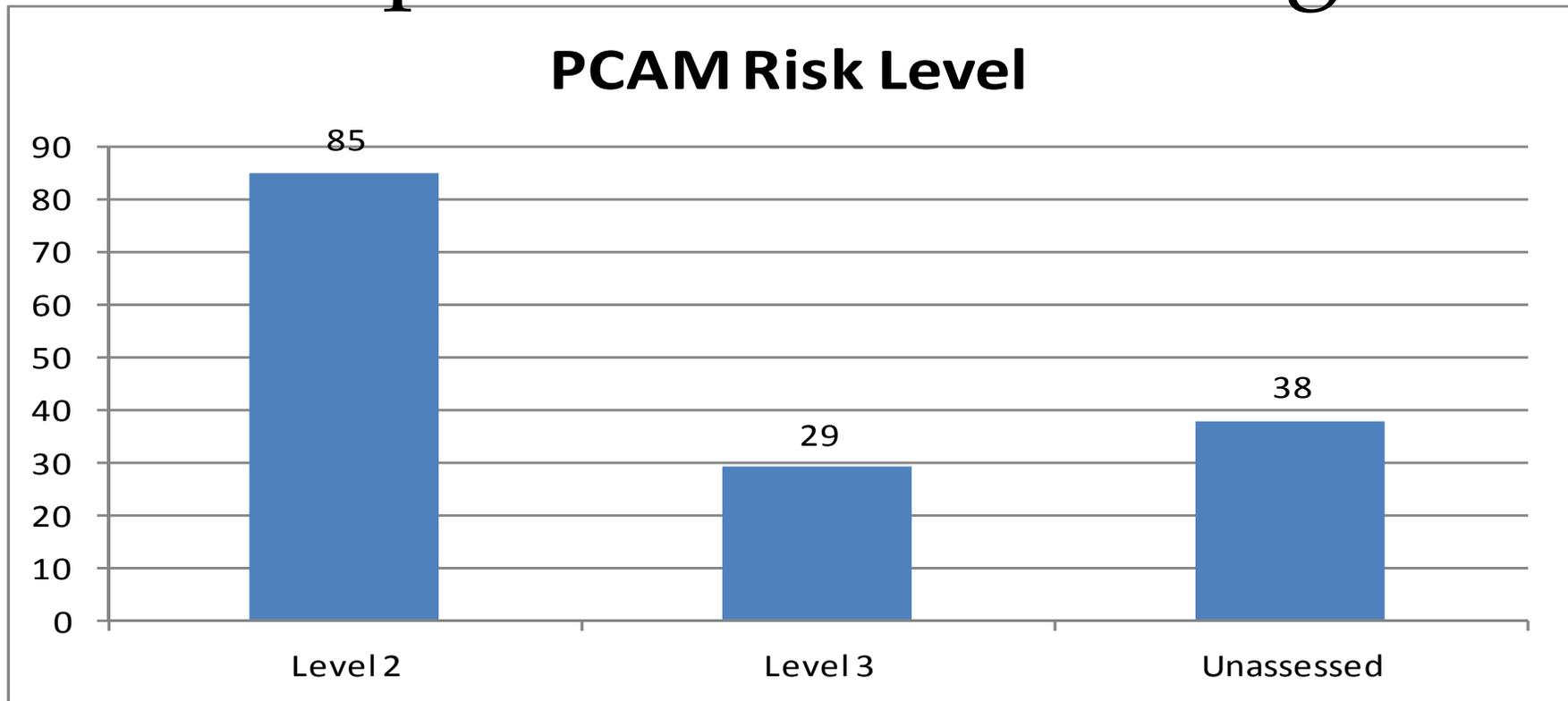
Services to be offered post-enrollment

Establish Initial home visit:	Program Education:	Complete Home Evaluation: Environmental House Call™	Monthly Patient and Family Support Groups:
<ul style="list-style-type: none"> Institute program requirements- Pt. Consent form and educational materials Complete Asthma Control Test Develop Asthma Action Plan PCAM Survey Completed Medication Reconciliation 	<ul style="list-style-type: none"> Emmi patient videos Teach back session Appropriate use of MDI Provide Vendors List Program picture ID Asthma medication education PCP/ Sub-specialist communication 	<ul style="list-style-type: none"> Home Evaluation for environmental triggers in: Living Room, Bedroom, Bathroom, Kitchen, and Dining room Checks for: Pulse O_x level, heart rate, CO₂ level in home, Humidity and temperature levels. mold/mildew, and CO₂ and fire alarms detectors Educate patient and family on the 7 principles of health homes and how to use supplies Provides: Asthma Action Plan, mattress covers, pillowcases, and allergen sprays. 	<ul style="list-style-type: none"> Provide education session Program education Guest speaker presentation Counseling session Blood pressure screening Environmental triggers Community resources

DSRIP Enrollment



Risk Stratification of Enrolled Participants in PCAM Program



Stratification tool – in terms of potential resource utilization

Levels 1-2 generally considered “low utilizers”

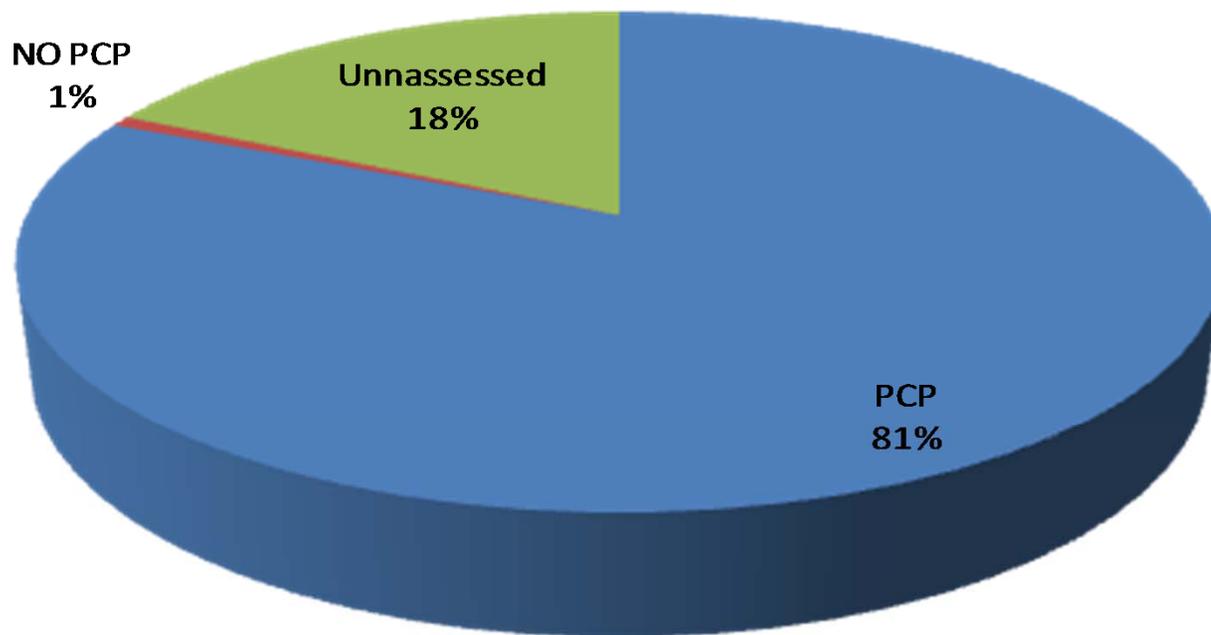
Levels 3-4 is the rising risk; “moderate utilizers”

Levels 5-6 are considered “high utilizers”

Enrolled Participants with Identified Primary Care *Access

* Access \neq Visit

Primary Care Access (%)



PCAM Metrics

- **Asthma Pre- Survey (n =101) (March 31st 2015)**
 - 76% agree that the hospital is the best place to go for asthma
 - 66% agree that they have a good understanding of Asthma
 - 47% agree that asthma has made them miss school
 - 84% agree that the healthcare provider has helped them control their asthma
 - 77% agree that they are interested in this program.

*Asthma Control Test

Ages 0 to 11

- ACT= 19.6
- n= 54
- How is your Asthma Today?
 - o 97% good or better
- How much of a problem is your Asthma when you run, exercise, or play sports?
 - o 78% okay or not a problem
- Do you cough because of your asthma?
 - o 97% said yes
- Do you wake up during the night because of your asthma?
 - o 65% said yes
- During the last 4 weeks, how many days did your child have daytime asthma symptoms?
 - o 33% said at least 4 to 10 days
- During the last 4 weeks, how many days did your child wheeze during the day because of asthma?
 - o 29% said at least 4 to 10 days
- During the last 4 weeks, how many days did your child wheeze during the day because of asthma?
 - o 26% said at least 4 to 10 days

*A score below 19 indicates poor asthma control

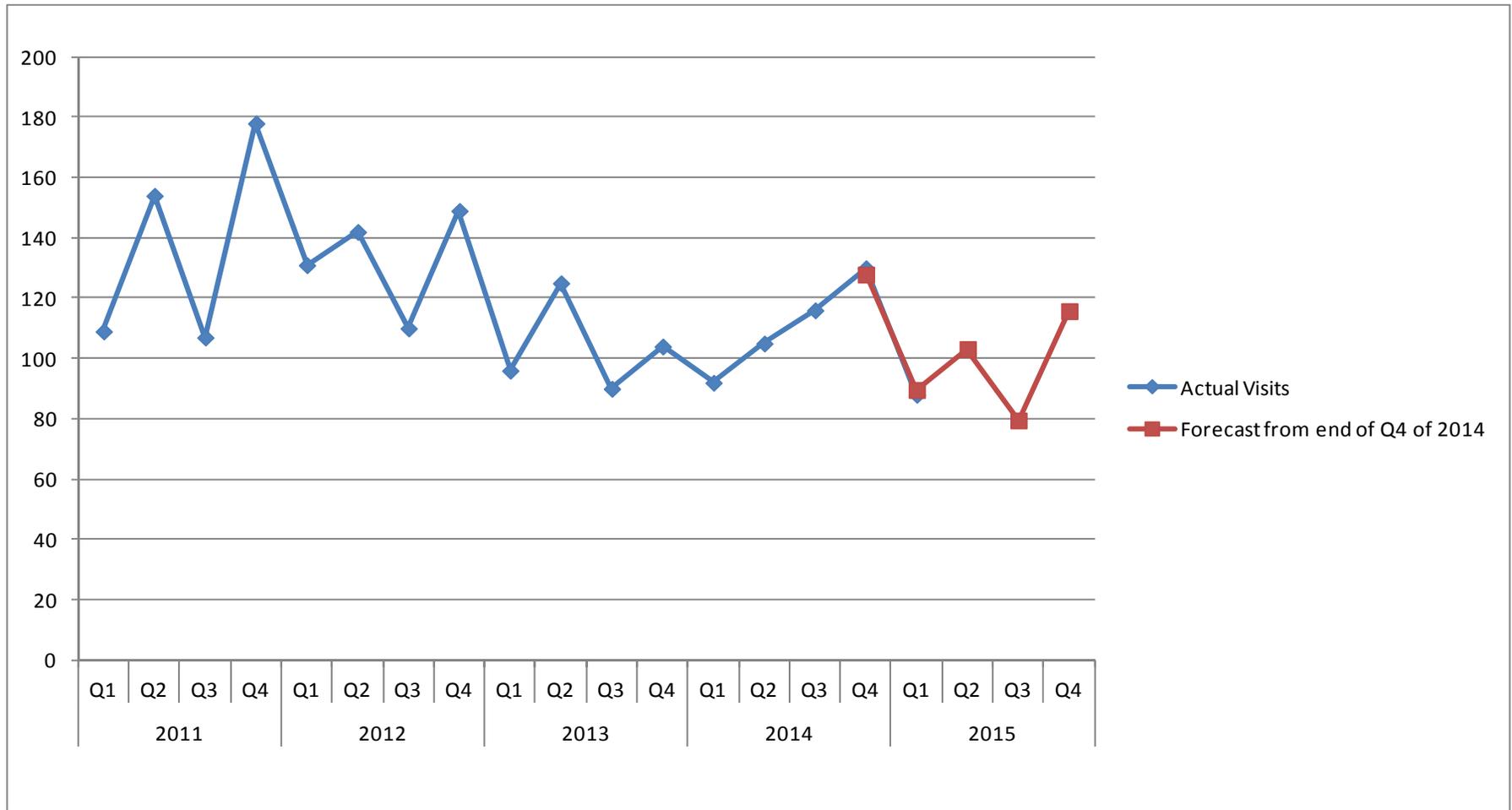
*Asthma Control Test

12 and older

- ACT = 17.5
- n = 20
- In the past 4 weeks, how much of the time did your asthma keep you from getting as much done at work, school, or at home?
 - o 50% said some of the time to all of the time
- During the past 4 weeks, how often have you had shortness of breath?
 - o 35% said at least 3 to 6 times a week
- During the past 4 weeks, how often did your asthma symptoms (wheezing, coughing, shortness of breath, chest tightness or pain) wake you up at night or earlier than usual in the morning?
 - o 65% said at least once or twice a week
- During the past 4 weeks, how often have you used your rescue inhaler or nebulizer medication (such as albuterol)?
 - o 65% said at least once a week
- How would you rate your asthma control during the past 4 weeks?
 - o 45% said well controlled or better

*A score below 19 indicates poor asthma control

DSRIP Trend and Forecast for ER Visits for Pediatric Patients with Asthma as Primary Diagnosis starting from Q1 of 2011



You are cordially invited to the Inaugural
Community Health Trust Fair

Sponsored by Jersey City Medical Center, a Barnabas Health Facility

The purpose of the event is to establish community partnerships and to bring awareness to the great services offered in "OUR" community.



Friday, March 13th 2015

12 noon to 2 pm

Jersey City Museum

350 Montgomery Street, Jersey City, NJ 07302

Please RSVP for the event and provide the information below to Sharnia Williams at 201.984.1298 or 201.912.4580, email: swilliams2@libertyhcs.org;

- ▶ Name of Organization
- ▶ Information Booth Needed - Y/N
- ▶ Number of Participants Attending
- ▶ 10 Minutes Presentation

 **Jersey City Medical Center**
 **Barnabas Health**

Life is better healthy.

4073 - 03/2015

▶ barnabashealth.org/jcmc

 **Jersey City Medical Center**
 **Barnabas Health**

Hudson County Students, Share Your Asthma Story



\$500 in Prizes up for Grabs in Video or Essay Contest

**Calling all Hudson County area students!
If you have asthma, we want to hear from you!**

Jersey City Medical Center is holding a contest to help raise awareness about asthma.

Contest Guidelines:

Students Grades K-4 – Drawing or Video Contest

- ▶ Topic: My healthy environment for living with asthma
- ▶ Submission requirements: Create/Draw an original 22" x 28" poster OR film a two-minute video about the topic.

Grades 5-12 – Essay Contest

- ▶ Topic: What healthy choices can I make to live healthy and symptom free with asthma? OR Does living with asthma affect my daily activities and how? (choose one)
- ▶ Submission requirements: Write an original, creative essay in response to one of the required topics.
 - 300 words for students in grades 5-8
 - 400 words for students in grades 9-12

Prizes

1st, 2nd and 3rd place winners from each age category will receive gift cards.

Deadline for submissions: April 30

Please email all submissions to: wealthfromhealthnj@gmail.com

For more contest information,
visit www.barnabashealth.org/jcmc
or contact 201.424.4521 or 201.424.3226.



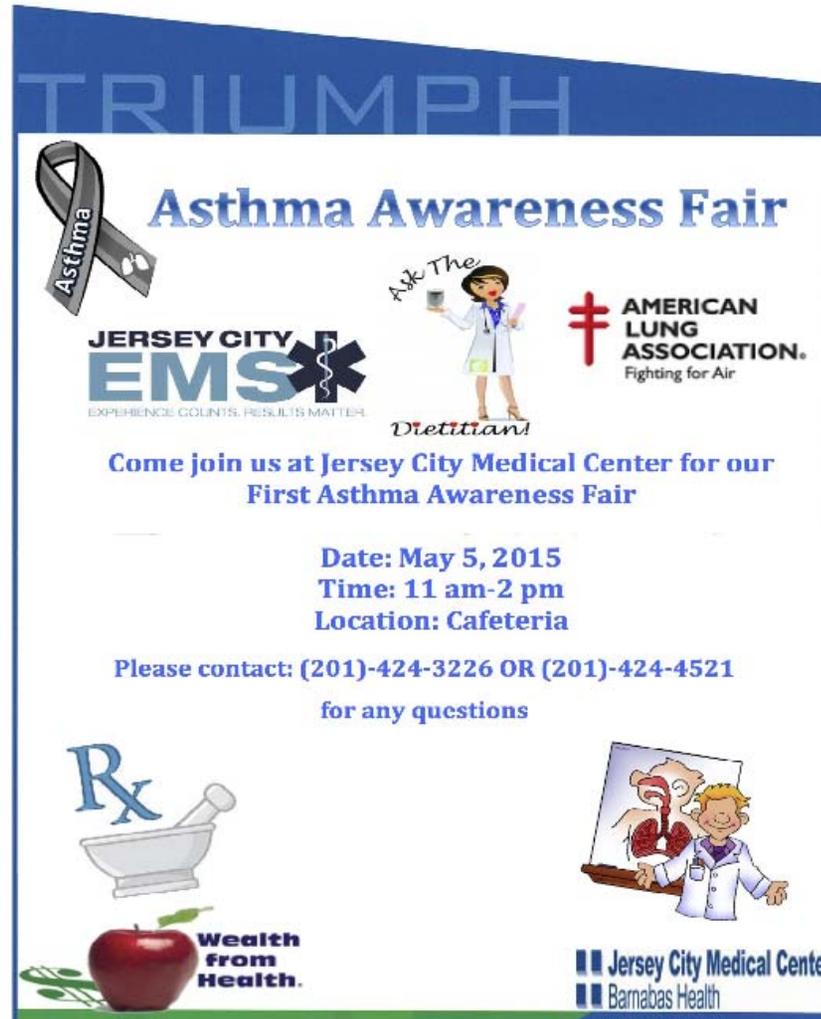
 **Jersey City Medical Center**
 **Barnabas Health**

Life is better healthy.

▶ barnabashealth.org/jcmc ▶ 201.915.2000

 **Jersey City Medical Center**
 **Barnabas Health**

Asthma Awareness Fair



TRIUMPH

 Asthma

Asthma Awareness Fair

 **JERSEY CITY EMS**
EXPERIENCE COUNTS. RESULTS MATTER.

Ask The

Dietitian!

 **AMERICAN LUNG ASSOCIATION.**
Fighting for Air

Come join us at Jersey City Medical Center for our First Asthma Awareness Fair

Date: May 5, 2015
Time: 11 am-2 pm
Location: Cafeteria

Please contact: (201)-424-3226 OR (201)-424-4521
for any questions

 **Rx**



 **Wealth from Health.**

 **Jersey City Medical Center**
Barnabas Health

Asthma Newsletter



SPRING 2015

Asthma News

Pediatric Asthma Case Management Program



Meet Our Asthma Educators

Raushanah Ali is an Asthma Educator at Jersey City Medical Center-Barnabas Health. She joined the program in August of 2014 and has done a remarkable job in helping start up the Pediatric Asthma Case Management program. Ms. Ali has over five years experience as a nurse in the fields of Acute Pediatric Care and Sub-Acute Rehabilitation. She is passionate about the future of children and hopes with this program she will be able to empower as many children as possible in understanding and managing their chronic conditions.

Candice Pimentel is an Asthma Educator at Jersey City Medical Center-Barnabas Health. She joined the organization as an intern and progressed to become an Asthma Educator with the Pediatric Asthma Case Management Program. She's a certified pharmacy technician for over 5 years and holds a Bachelor's Degree in Science from Rutgers University with a concentration in Public Health. She hopes to make a difference in the community by educating children, and helping build a productive and healthy society for their future.

Upcoming Events

May 5, 2015

- Asthma Awareness Fair

May 7, 2015

- Asthma Awareness Presentation in P.S. 30

May 9, 2015

- Got Asthma? - Patient & Family Support Group



PCAM PROGRAM

SPRING 2015

Pediatric Asthma Case Management and Home Evaluation Program



Jersey City Medical Center-Barnabas Health has established an innovative Pediatric Asthma Case Management and Home Evaluation (PCAM) DSRIP program for Hudson County residents. DSRIP is a federal program that helps assure care outside the hospital walls improves the overall health of our community. The PCAM program is designed to help children and their families control and self manage their asthma condition. PCAM is a free program, which began in August of 2014. It has effectively and efficiently provided community outreach education by participating in school activities, community events, and health fairs. Through our partnerships with federally qualified health centers (FQHCs) and school nurses we have been able to extend services throughout Hudson County. Within a span of seven months, PCAM at Jersey City Medical Center has successfully enrolled 150 children (and counting). Furthermore, the Asthma Educators have been able to attend 50+ community events and health fairs throughout Hudson County. They continue to develop and maintain over 100 partnerships with community vendors, physician practices, and public & private schools and they have created an effective and appropriate educational curriculum for our community members and partners.



Environmental House Calls

Environmental House Call™ is part of PCAM and available free of charge to the members. Thanks to a partnership with the Department of Maternal Health in Hudson County our Asthma Educators, received the "Healthy Homes" training at Jersey City Medical Center. Staffs were educated on important environmental triggers that should not be in a patient's home and the manner in which they can be reduced and/or eliminated; including important information on cleaning chemicals, which can be harmful to an asthmatic. The Asthma Educators have also received training from Rutgers University to help identify mold and mildew in the homes; both triggers that affect asthmatics. Educators incorporate and utilize this training into their Environmental House Call™ to improve the home conditions of their patients. They have built a relationship with the families by helping them identify and reduce/eliminate environmental triggers in the home including providing products that reduce those triggers. Approximately 20 homes have been evaluated with positive results.



Monthly Support Groups

The Asthma Educators conduct weekly and monthly support groups in the I'QUICs, schools and at the Medical Center to educate the children and families of those with Asthma in the community to better assist these patients on their chronic conditions as well as help improve their quality of life. The support group brings together children and families who can share experiences while learning about asthma, medications and how they work, healthy homes presentations and guest speakers. Healthy refreshments are always served!



An Interview with Physician Champion for the DSRIP Program Dr. Susan Walsh

Dr. Walsh has been a part for Jersey City Medical Center-Barnabas Health for 3 years. She was interviewed on a series of questions on her current position as the physician champion of the program and the progress it has made.

What is your current role in the organization and how does it differ from your previous role at the State Level?

"I am Vice President for Community Medicine and Medical Director for ACO activities. When I was at the state as Deputy Commissioner of Health, it was more about general public health policies that would affect communities around New Jersey, including bio-threats, vaccinations and toxic spaces. Now I can narrow the focus to the community of Jersey City: looking for diseases and barriers to care that are affecting our neighborhood. The focus is narrower but the goal is the same: healthier residents, children, and communities."

Why did the Senior Executive Team select Pediatric Asthma for the community out 17 possible DSRIP projects?

"Although we are not a Children's Hospital, if we want a healthier community we have to start young and asthma remains one of the major causes of school absenteeism. I had helped develop asthma programs in the past and had worked on the federal level for asthma initiatives in New Jersey a few years ago. So we already had some proven programs to work with schools also, our innovative Wealth from Health® reward points had worked with adults managing disease. So it was a great way to apply these experiences to this new program and new population and see if we were right that we could help create a healthier

Jersey City. Less emergency room visits and less absenteeism will show that we are on the right path."

What are some of the challenges in implementing the DSRIP program in the community and the reporting requirements?

"We actually found from the work our Asthma Educators have done, that some parents think asthma is an acute illness and it goes away. And sometimes it's hard to engage families when they think the disease is cured. Asthma is a chronic disease and untreated it can be a barrier to having a productive, happy life. So one of the challenges is helping families understand the need to manage asthma even when your child feels better.

Another challenge is that this is part of the larger federal DSRIP project and was meant to help hospitals become more involved in the needs of patients before they come to the emergency room or need hospitalization. While JCMC-BH has always prided itself on community involvement, the federal government requires us to now track almost 80 numbers to prove that our community is becoming healthier. So we have to spend time calculating and following the new DSRIP requirements while also caring for the children of the community so that they are healthy."

What is population health and how does it relate to PCAM in the community?

"Population Health says that great healthcare is not only individually based and but that it is also population driven so that all across a community everyone is applying the same goals and living healthy. It also ties into the government's *Triple Aim*, which is better quality of care for a community, at a lower cost, with an improvement

of the patient experience. So measures have been developed to see if we can achieve those three aims. So in addition to your child controlling asthma and feeling better, how many children across the community are not absent from school due asthma? In other examples, how many adults who are diabetic in your community have good control, or how many people are not coming back to the hospital because they are getting good outpatient-based care? Population Health is not really a new concept but it is a new focus to make sure everyone has the right care, at the right location by the right professional!"

What do you think has been the two important accomplishments for the PCAM program?

"One would be that our Asthma Educators have been able to effectively communicate to parents that asthma is a chronic disease and the right outpatient management can keep their children in school and out of emergency rooms. To be able to teach asthma to the community is rewarding because there are a lot of misconceptions but asthma is manageable with a little work.

The second is the success of the Asthma Educators in finding that most of the patients enrolled have a parent or sibling with asthma so we can reach a larger community of patients. It's always wonderful when healthcare professionals can impact so many people to have healthier lives."

What are some of the lessons learned in managing a program of this magnitude?

"That it can be an incredible administrative burden but worth it as it improves health in children. If I could design the program, I would cut the metrics from 80 to about five...choosing ones that can tell the public and government whether we are making a difference. That would free up a lot of time for my staff to see the families and not crunch data!

What are the future implications of the program to the community?

"Hopefully we are going to grow a healthy, educated, next generation of workers. This is what every community wants and needs. Reducing school absenteeism correlates to improving graduation rates. It is hard to get a good paying job in America without high school graduation and hard to have a good quality of life when you are one asthma attack away from a visit to the emergency room. To this end, my team is committed to fostering the principals of population health and working hard to make PCAM a growing success."



Dr. Susan Walsh
Vice President for Community Medicine
& ACO Medical Director

Patient Testimonial

Damaris Beltre and her son Ancudy De La Cruz have been with the program since September 2014. They have attended every support group since the program started, and have allowed the Asthma educators to perform an Environmental House Call in their home. Damaris Beltre said: "I have learned many important things about Asthma that I was not aware of through the program. I learned about many different environmental triggers that can be affecting my son's asthma, but with the Environmental House Call and education provided by the Asthma educators I have been able to improve my families living condition. I am so thankful for the education and free resources provided by this program that I recommend many families to take advantage of it. There should be many more programs like this one around the community. Great job Jersey City Medical Center!"



Margaret Ann Johnson and her son Nicholas Davies have been with the program since September of 2014. They have attended all support groups or any activities provided by the program. Ms. Johnson says, "I find this program very educating and interesting because it opens up my mind and helps me understand new things about asthma that I was not aware of. Although my son is only 7 years old, I feel that the program has allowed him to understand and be aware of triggers around the environment and how to use his inhaler correctly. This has allowed him to take care of his chronic condition in the proper way. I always look forward in attending the monthly support groups at the Medical Center, because it allows me to take more precaution with my son's asthma and understand that he will live with this condition for the rest of his life. The education provided reinforces what I already have learned about asthma, which is important. I believe the Asthma educators are doing an amazing job in educating my family and I on asthma, which can be so easy to manage if you have the proper resources. They are truly the best!"

Questions?

