Pediatric Asthma Case Management and Home Evaluation Program

PCAM

Jersey City Medical Center – Barnabas Health
PCAM Activity Report

Quick Stats
As of September 30, 2015

- 213 children enrolled
  - DSRIP Goal: 200 December 31st 2015
    - Note: additional household asthmatic adults enrolled in Wealth from Health® outside of DSRIP
    - Total of 395 Attributed Patients enrolled

- 20 Home Evaluations completed
  1. Home Evaluation for environmental triggers in: Living Room, Bedroom, Bathroom, Kitchen, and Dining room
  2. Checks for: Pulse O₂ level, heart rate, CO₂ level in home, Humidity and temperature levels, mold/mildew, and CO₂ and fire alarms detectors
  3. Some items that have been provided: Asthma Action Plan, mattress covers, pillowcases, and allergen sprays
PCAM Activity Report

Quick Stats
As of September 30, 2015

• School Outreach
  – 100+ School Nurse Relationships
  – Collaboration with Jersey City and Bayonne public schools and private schools
  – 30+ Outreach events in the schools
  – 20+ Back to School Events/ PTO Meeting
  – Program Redesign (30+)

• Documentation review required for consistency across partners
  – Asthma Control Test
  – Asthma Action Plan
**Full Implementation of Program Cycle Development**

**Patient presented with Asthma Symptoms**

- **ER Pediatric Team**
  - Provides asthma treatment and control
  - Provides an overview of the pediatric care management and home evaluation program
  - Provides the contact information of the asthma educators
  - Generates daily report to send to the team

- **Pediatric Inpatient Admission Unit**
  - Care management nurse liaison collaborates with asthma educators to provide bedside education
  - Respiratory team will consult if needed
  - Pediatric hospitalist team provide clinical interventions
  - Asthma educators round on pediatric inpatient unit to educate patients and family
  - Send daily 30 day revisit reports to the Data Analyst

- **School Nurses**
  - Provides asthma treatment and control
  - Provides an overview of the pediatric care management and home evaluation program
  - Provides the contact information of the asthma educators

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**Establish Initial home visit:**

- Institute program requirements- Pt. Consent form and educational materials
- Complete Asthma Control Test
- Develop Asthma Action Plan
- PCAM Survey Completed
- Medication Reconciliation

**Program Education:**

- Emmi patient videos
- Teach back session
- Appropriate use of MDI
- Provide Vendors List
- Program picture ID
- Asthma medication education
- PCP/ Sub-specialist communication

**Complete Home Evaluation:**

- Environmental House Call™
  - Home Evaluation for environmental triggers in: Living Room, Bedroom, Bathroom, Kitchen, and Dining room
  - Checks for: Pulse Ox 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.

**Monthly Patient and Family Support Groups:**

- Provide education session
- Program education
- Guest speaker presentation
- Counseling session
- Blood pressure screening
- Environmental triggers
- Community resources
- Lunch and Learn at FQHCs

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**Services to be offered post-enrollment**

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**Jersey City Medical Center**

**Barnabas Health**
PCAM Attribution List

Medicaid Population

- Attributed a total of 20,209
  - Matched 14,968 to the hospital
  - 890 have had a **Behavior Health** related diagnosis
  - 130 have HIV- To be linked with **CCC Program**
  - 80 have expired
  - 39 have been reported as homeless- To be linked with **MASSH Program**

Charity Care Population

- Attributed a total of 9,803
  - Matched 9,647 to the hospital
  - 450 have HIV- To be linked with **CCC Program**
  - 153 have been reported as homeless- To be linked with **MASSH Program**
  - 146 have had a **Behavior Health** related diagnosis
  - 55 have expired

Wealth from Health® and DSRIP Program have 395 attributed programs enrolled into the program
DSRIP Trend and Forecast

Actual Emergency Room Visits and expected Emergency Room Visits for Primary Asthma Diagnosis (Pediatrics) Trend. First forecasted from Q2 of 2014
DSRIP Enrollment

Enrolled

Target
Enrolled Participants with Identified Primary Care *Access

* Access  Visit

Primary Care Access (%)

- PCP 98%
- NO PCP 2%
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”
Asthma Control Test

• The Asthma Control Test is a way to determine if participant’s asthma symptoms are well controlled
• Assessment is made every six months by an Asthma Educator
• First Asthma Control
  - Any score under 19 is considered to be poorly managed
    • For those between the ages of 0-11 the average pre score was ~19.5 (n=102)
    • For those between the ages of 0-11 the average second score was ~23.2 (n=29)
    • For those 12 and above, the average pre score was ~18.7 (n= 38)
    • For those 12 and above, the average second score was ~21.9 (n= 15)
There is a replicable normal distribution in terms of acuity for 2013, 2014, and 2015. A level “1” represents the highest severity and a level “5” represents the lowest severity.
3 Months (n=35), 6 Months (n=33), 9 Months (n=21)

Higher% is Better
Percentage of Enrolled Participants who did not Wake up in the Middle of the Night due to Asthmatic Episodes in the Past Month

3 Months (n=35), 6 Months (n=33), 9 Months (n=21)

Higher% is Better
Percentage of Enrolled Participants who did not Utilize Albuterol neb., Albuterol MDI, Xopenex for more than 2 Days in the Past Month

3 Months (n=35), 6 Months (n=33), 9 Months (n=21)

Higher % is Better
Percentage of Enrolled Participants who did not Visit the ER with an Asthma Related Diagnosis in the Past Month

3 Months (n=35), 6 Months (n=33), 9 Months (n=21)

Higher % is Better
Percentage of Enrolled Participants who was not Admitted with an Asthma Related Diagnosis in the Past Month

3 Months (n=35), 6 Months (n=33), 9 Months (n=21)

Higher % is Better
Percentage of Enrolled Participants who did not Miss a Day of School due to Asthmatic Episodes in the Past Month

3 Months\( (n=35) \), 6 Months\( (n=33) \), 9 Months \( (n=21) \)

Higher % is Better

- 3 Months: 77.1%
- 6 Months: 63.6%
- 9 Months: 76.2%
Asthma Survey Pre-enrollment (n= 151)

- 73.5% agree that the hospital is the best place to go for asthma
- 62.8% agree that they have a good understanding of Asthma
- 51.0% agree that asthma has made them miss school
- 83.9% agree that the healthcare provider has helped them control their asthma
- 89.9% agree that they are interested in this program.
# Post Satisfaction Survey

<table>
<thead>
<tr>
<th>Before Joining the Program</th>
<th>Statements</th>
<th>After being in the program for more than 6 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  2  3  4  5</td>
<td>I received clear information in order to take care of my Asthma at home</td>
<td>1  2  3  4  5</td>
</tr>
<tr>
<td>1  2  3  4  5</td>
<td>I know who to contact when I have a question about my asthma</td>
<td>1  2  3  4  5</td>
</tr>
<tr>
<td>1  2  3  4  5</td>
<td>The staff members were friendly and helpful to me</td>
<td>1  2  3  4  5</td>
</tr>
<tr>
<td>1  2  3  4  5</td>
<td>I was satisfied with the service that I received today</td>
<td>1  2  3  4  5</td>
</tr>
<tr>
<td>1  2  3  4  5</td>
<td>I would recommend this program to my friends and family who have asthma</td>
<td>1  2  3  4  5</td>
</tr>
</tbody>
</table>
Asthma Survey Pre Versus Post Enrollment

Asthma Survey Pre and Post-enrollment (n=41)

• The average belief of the sample size were Pre Enrollment:
  – 47.5% agree that the hospital is the best place to go for asthma
  – 50.0% agree that they have a good understanding of Asthma
  – 82.5% agree that asthma has made them miss school
  – 82.5% agree that the healthcare provider has helped them control their asthma
  – 82.5% agree that they are interested in this program.

• The average belief of the sample size were Post Enrollment:
  – 100.0% agree that the hospital is the best place to go for asthma
  – 100.0% agree that they have a good understanding of Asthma
  – 100.0% agree that asthma has made them miss school
  – 100.0% agree that the healthcare provider has helped them control their asthma
  – 100.0% agree that they are interested in this program.
Wealth from Health®

Back to School Health Fair

Location: 360 Martin Luther King Drive (Parking Lot)
Jersey City, NJ 07305
Date: August 28, 2015
Time: 12:00pm-4:00pm
- Free Health Screenings
- Education
- Giveaways

For more information or questions please call:
201.388.1290
I LOVE JERSEY CITY PUBLIC SCHOOLS
BACK TO SCHOOL FESTIVAL

SATURDAY, SEPTEMBER 19, 2015
1 TO 4 P.M. AT LIBERTY STATE PARK
NORTH COVE FIELD, NEAR OLD RAILROAD STATION

ALL JERSEY CITY PUBLIC SCHOOL STUDENTS AND FAMILIES ARE INVITED TO ATTEND THIS FREE EVENT!

FOR MORE INFORMATION, PLEASE CALL 201.915.6111 OR VISIT OUR WEBSITE AT WWW.JCBOE.ORG

CONTINUOUS TRANSPORTATION WILL BE AVAILABLE FROM
PS 28, DICKINSON HS, MCNAIR ACADEMIC, FERRIS HS, PS 23
LINCOLN HS, SNYDER HS, AND MS 10, LSP LIGHT RAIL
Accomplishments

- 213 members enrolled; One of the highest services linkage rate to attribution list (395 members)
- Expanding partnership with community agencies- Head Start, Community Advisory Board, Board of Education, Rising Tidal, Hudson Milestones, etc while maintaining and improving previous community partnerships
- Translation and revision of program Brochures from English to Spanish
- Establishing a relationship with families before conducting a home evaluation
- Lunch and Learn at Federally Qualified Health Centers
- Continuous PDSA Cycles
Accomplishments

- Asthma Education and Training provided to Hudson County School professionals
- Successful Back to School Event which provide over 35 Book bags and School supplies to community members
- Outreach to all public and some private schools in Jersey City, also have been active in Bayonne and Union City
  - Major sponsor with the Board of Education for Back to School events
- Creating an effective and appropriate educational curriculum for our members and their family
“Some Olympic athletes have asthma. They take medicine and warm up before sports just like I do.”