



ADVANCING INTEGRATED HEALTHCARE

# Welcome

## Asthma Planning Meeting

*Care Transformation Collaborative of Rhode Island*

KICK OFF MEETING | November 5, 2021

# Agenda

Topic <i>Presenter(s)</i>	Duration
Purpose of the Core Planning Team <i>Ashley Fogarty, MPH, Asthma Program Manager, RIDOH</i>	10 minutes
Welcome Planning Team Members <i>Ashley Fogarty, MPH, Asthma Program Manager, RIDOH</i>	20 minutes
Asthma Strategic Plan, Objectives & Clinical Quality Measures <i>Ashley Fogarty, MPH, Asthma Program Manager, RIDOH</i>	20 minutes
Next Steps & Meeting <i>Susanne Campbell, RN, MS, PCMH CCE, CTC-RI Senior Project Director</i>	10 minutes

# Purpose of the Core Planning Team

The Core Planning Team will be utilized to help develop the framework and oversight for the learning collaborative. The planning process will include:

- 1) Review of asthma related state-wide **performance data and goals**, objectives and strategies identified in the 2021-2024 RI Asthma Strategic plan;
- 2) Review of the literature to identify **“best practice strategies”** including baseline practice assessment surveys, patient/caregiver surveys, evidence based tools and adult learning strategies (i.e. practice case presentations using an expert panel approach, learning collaborative quality improvement approach;
- 3) Identification of **population(s) of focus** for the learning collaborative;
- 4) Identification of potential **workflows, tools, and knowledge** that would help **improve asthma care management**;
- 5) Identification of potential **subject matter content experts** and **practice facilitator coaches**;
- 6) Identification of **clinical quality measures** for reporting baseline status and improvement over time;
- 7) Development of a **“Call for Applications”** for the learning collaborative;
- 8) Planning meetings to **assess and monitor learning collaborative** and **practice performance needs**;
- 9) **Planning for sustainability and spread.**

# Core Planning Team Action Steps

- Review asthma state wide performance data (Asthma Strategic Plan)
- Identify population of focus
- Develop a framework and oversight for learning collaborative
- Review of literature “best practice strategies”
  - Baseline practice assessment surveys
  - Patient engagement /surveys
  - Evidence based tools and strategies

# Getting to Know Asthma Planning Team



Ashley Fogarty, MPH  
Asthma Program  
Manager, RIDOH



Susanne Campbell,  
RN, MS, PCMH CCE  
Sr Project Director, CTC-RI



Carolyn Karner, MBA  
Project Mgmt & Eval



Pano Yeracaris,  
MD, MPH,  
Clinical Strategist CTC-RI

“What I’d love to see come out of this project? Or how do you think you can contribute?”

# Getting to Know Asthma Planning Team



Elizabeth McQuaid, PhD  
Psychiatry & Behavioral  
Health Services, Coro West



Daphne Koinis-Mitchell, PhD  
Child & Family Psychiatry, Rhode  
Island Hospital



June Tourangeau, LPN



Ty-Eisha Rivera,  
Family Consultant

“What I’d love to see come out of this project? Or how do you think you can contribute?”

# Getting to Know Asthma Planning Team



Kelly Orr,  
PharmD, AE-C  
Associate Dean and  
Clinical Professor,  
URI



Stephen Kogut, PhD,  
MBA, RPh  
Professor, URI College  
of Pharmacy



Virginia Lemay,  
PharmD, CDOE,  
CVDOE  
Clinical Associate  
Professor, URI



Gayle Dichter, MBA  
VP of Integrated Care  
Strategies, NHPRI

“What I’d love to see come out of this project? Or how do you think you can contribute?”



# Getting to Know Asthma Planning Team



Patricia Flanagan, MD,  
FAAP  
Professor of Pediatrics  
W. Alpert Medical School  
Brown University  
Hasbro Children's Hospital



James Ginda, MA,  
RRT, AE-C, FAARC  
Manager, Respiratory Care  
(Respiratory Therapy &  
Pulmonary Function Lab)  
Kent Hospital



Linda Mendonça, DNP,  
RN, PHNA-BC, NCSN,  
FNASN  
State School Nurse  
Consultant, RIDOH

“What I'd love to see come out of this project? Or how do you think you can contribute?”



# Getting to Know Asthma Planning Team



**Andrew Foderaro, MD**  
Pulmonologist, Brown  
Medicine Division of  
Pulmonary, Critical Care



**Margarita Robledo Guedes**  
RI Outcome Broker, Green &  
Healthy Homes Initiative



**Aris Garro, MD**  
Brown Emergency  
Medicine, Hasbro  
Children's Hospital

“What I’d love to see come out of this project? Or how do you think you can contribute?”

# Getting to Know Asthma Planning Team



Jennifer Wall, CPS  
American Lung  
Association



Amber Pelletier, MSW  
Division Director, Eastern,  
American Lung  
Association



Deborah Pearlman, PhD  
Epidemiologist and Evaluator for RIDOH  
Asthma Program  
Brown University School of Public Health  
Associate Professor of Epidemiology Practice  
Hassenfeld Child Health Innovation  
Institute Affiliated Scholar

“What I’d love to see come out of this project? Or how do you think you can contribute?”

# Rhode Island Asthma Strategic Plan 2021-2024

## Purpose for the Plan:

- An opportunity for cross-collaboration and collective impact in how programs and organizations address asthma across the state;
- Offers a foundation and guidance for areas of focus;
- Set priorities for asthma, healthy housing or other coalitions/programs;
- Cite grant proposals to provide rationale and validation for funding requests;
- Reference for community health improvement planning



## PRIORITY 1:

### Housing

**GOAL 1:** All Rhode Islanders live in healthy and affordable housing that is free of harmful conditions that increase asthma related risks.



## PRIORITY 2:

### Healthcare/ System

**GOAL 2:** Improve health outcomes and achieve health equity by enhancing access to affordable, holistic, and comprehensive asthma care for all people in RI.



## PRIORITY 3:

### Education System & Schools

**GOAL 3:** Collaboration among key stakeholders to support equitable K-12 healthy school environments that promote respiratory health, wellness, and readiness to learn.



## PRIORITY 4:

### Air Quality & Transportation

**GOAL 4:** Ensure all Rhode Islanders, particularly low-income communities of color, have clean and healthy indoor and outdoor air quality.



# RIDOH Asthma Strategic Plan Health Objectives

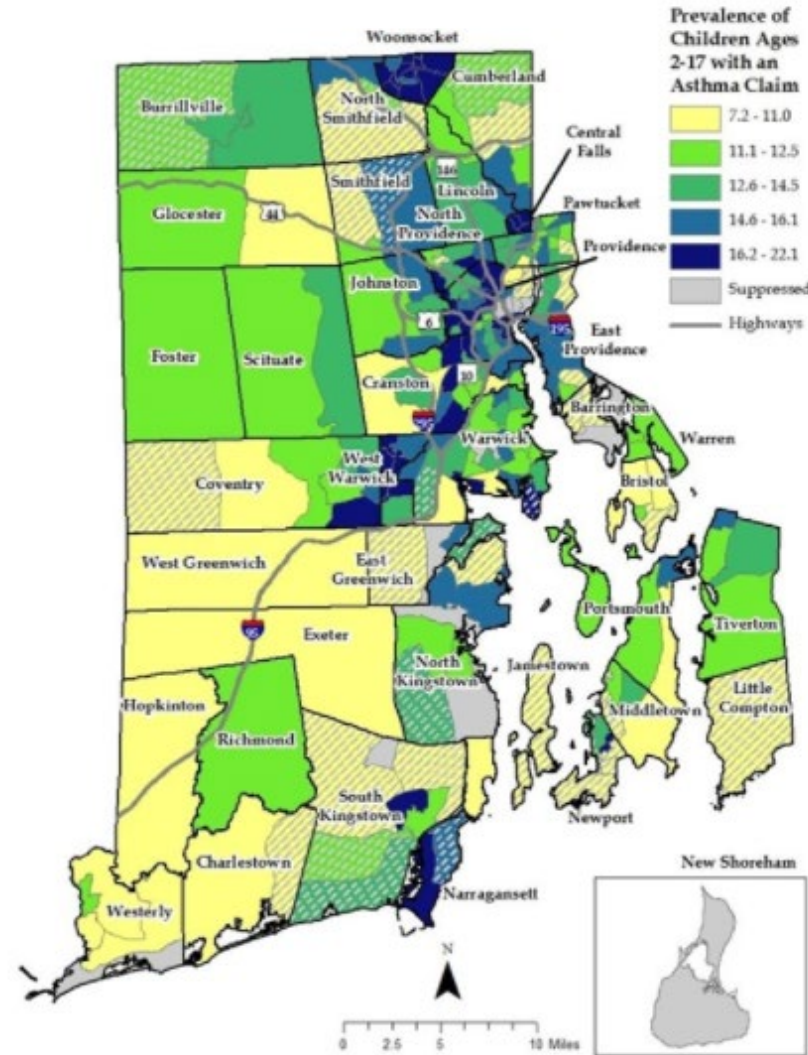
Objective	Strategies
<p><b>Decrease asthma related ED visits among children aged 2-17 by 5% by 2024</b></p>	<ul style="list-style-type: none"> <li>• Promote asthma screening for children 2-17;</li> <li>• Increase the number of health care providers that address environmental factors related to asthma;</li> <li>• Implement targeted outreach to populations who report disparate asthma outcomes;</li> </ul>
<p><b>Increase the number of children with well controlled asthma</b></p>	<ul style="list-style-type: none"> <li>• Identify and promote 20 opportunities for RI children to receive affordable, comprehensive asthma care;</li> <li>• Children with asthma and their caregivers receive, understand and use their Asthma Action Plans;</li> <li>• Children receive a referral to a certified asthma educator following a positive asthma screen;</li> <li>• Provide culturally and linguistically appropriate literature for asthma triggers, control programs and treatment;</li> <li>• Explore medication adherence among children who have asthma enrolled in Medicaid;</li> <li>• Collaborate with pharmacists on medication use, adherence and education;</li> <li>• Using systems approach to train providers on best practices for asthma care and management;</li> <li>• Provide asthma education programs that offer CEU’s to providers</li> <li>• Advocate for the inclusion of CAE and CHW’s in value-based or other payment</li> </ul>
<p><b>Increase the utilization of RI-ACP funded programs by 10% by 2024</b></p>	<ul style="list-style-type: none"> <li>• Promote awareness of RIACP funded programs among community health centers, pharmacies and school nurse teachers that serve target populations with disparate asthma outcomes;</li> <li>• Promote referrals to RIACP funded programs from community health centers;</li> <li>• Promote RIACP funded programs as an opportunity for health care providers to address environmental factors related to asthma;</li> <li>• Promote use of multi-lingual and cultural services among RIACP programs</li> </ul>

# Asthma Strategic Plan Health Objectives (continued)

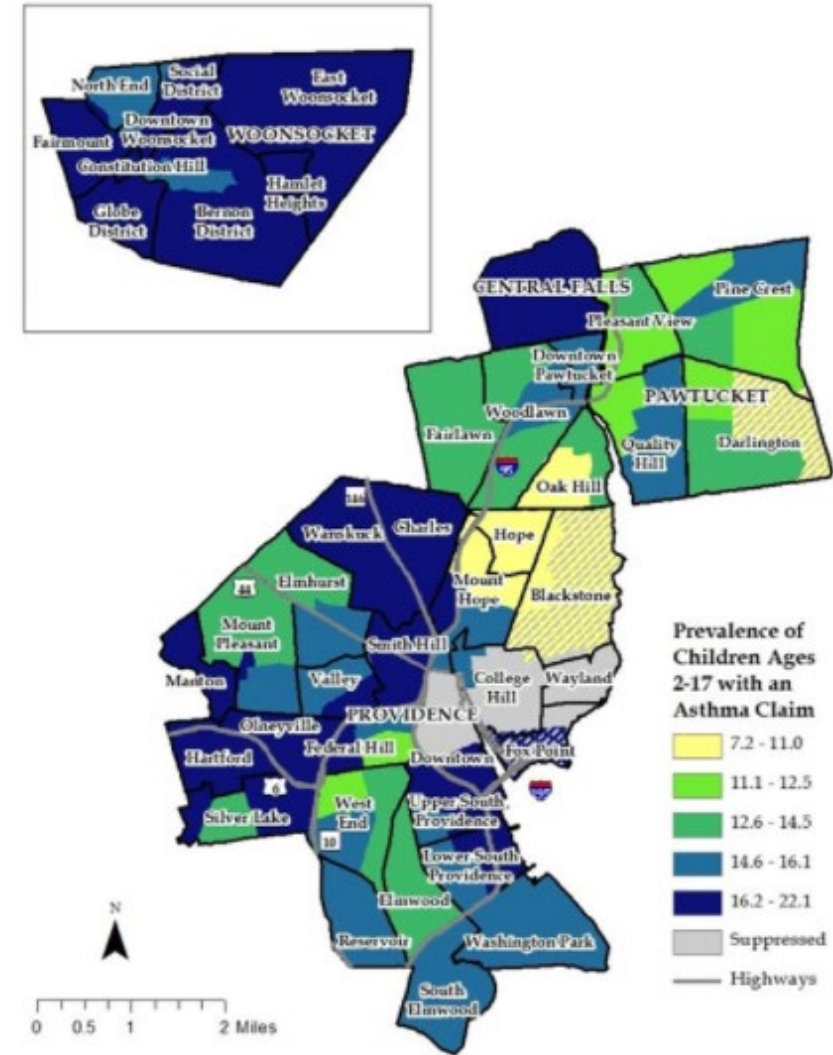
Objective	Strategies
<p><b>Increase the number of certified asthma educators by 30 and CHW's by 50 who are trained in asthma and healthy housing by 2024</b></p>	<ul style="list-style-type: none"> <li>• Promote certification testing for asthma educators to health professionals through recruitment and retention efforts;</li> <li>• Establish Certified CHW specialty certification for asthma and health housing</li> <li>• Promote bilingual and multicultural asthma education;</li> <li>• Promote scholarships</li> </ul>
<p><b>Increase the number of payers or provider practices that utilize the home asthma response program (HARP) or evidence based asthma home visit programs into health care transformation efforts by 2024</b></p>	<ul style="list-style-type: none"> <li>• Advocate for inclusion of asthma home visiting in value based or other payment arrangements;</li> <li>• Promote referral to HARP among provider practices and ED's</li> </ul>
<p><b>Engage 50 school nurses in asthma training to increase asthma management within schools by 2024</b></p>	<ul style="list-style-type: none"> <li>• Identify a school nurse collaborative to learn about existing programs, gaps and barriers to manage asthma in RI Schools;</li> <li>• Implement management training to school nurse collaborative that addresses gaps and barriers;</li> <li>• Promote use of bilingual and multicultural asthma education materials in RI</li> </ul>



# Asthma Hotspots



Asthma Hotspot Prevalence in Rhode Island

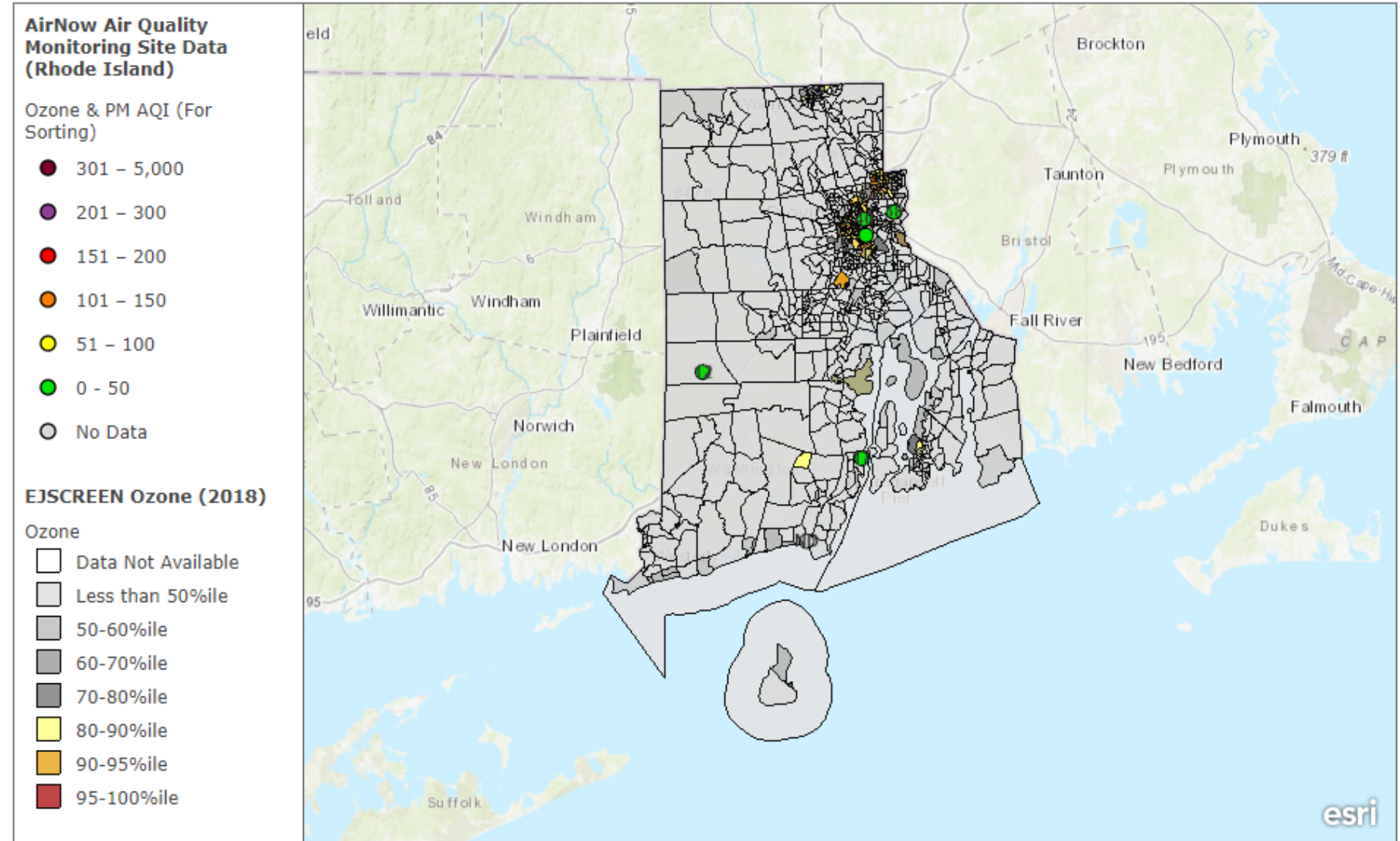


Asthma Hotspot Prevalence in Core Cities



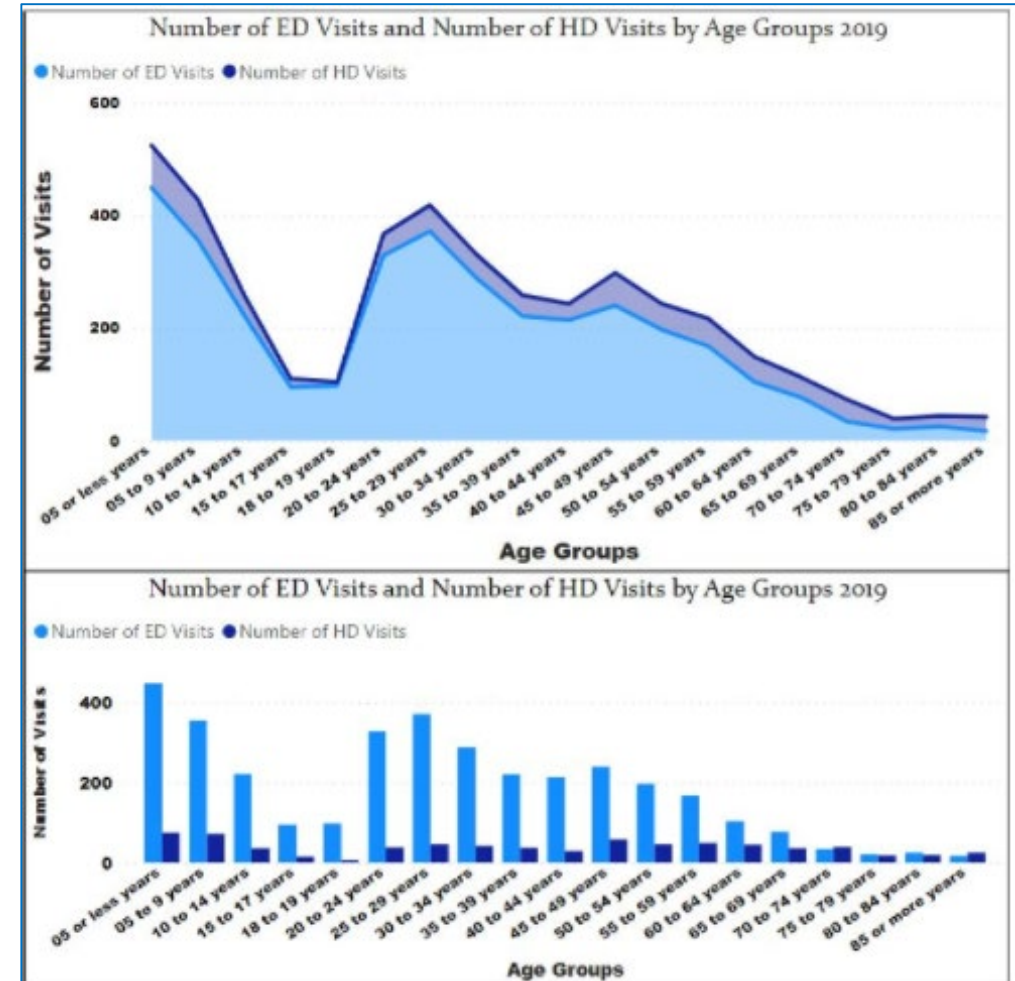
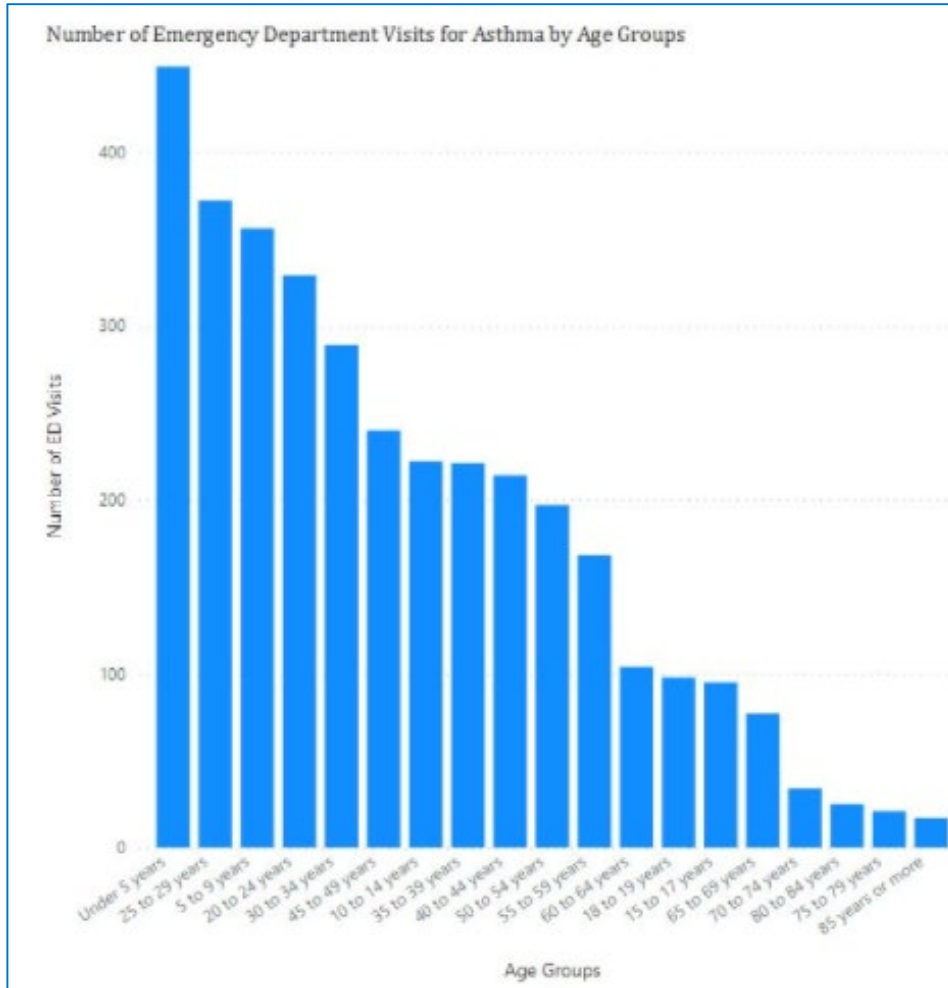
# Air Quality & EJScreen (2018)

## Air Quality and EJSCREEN (2018)

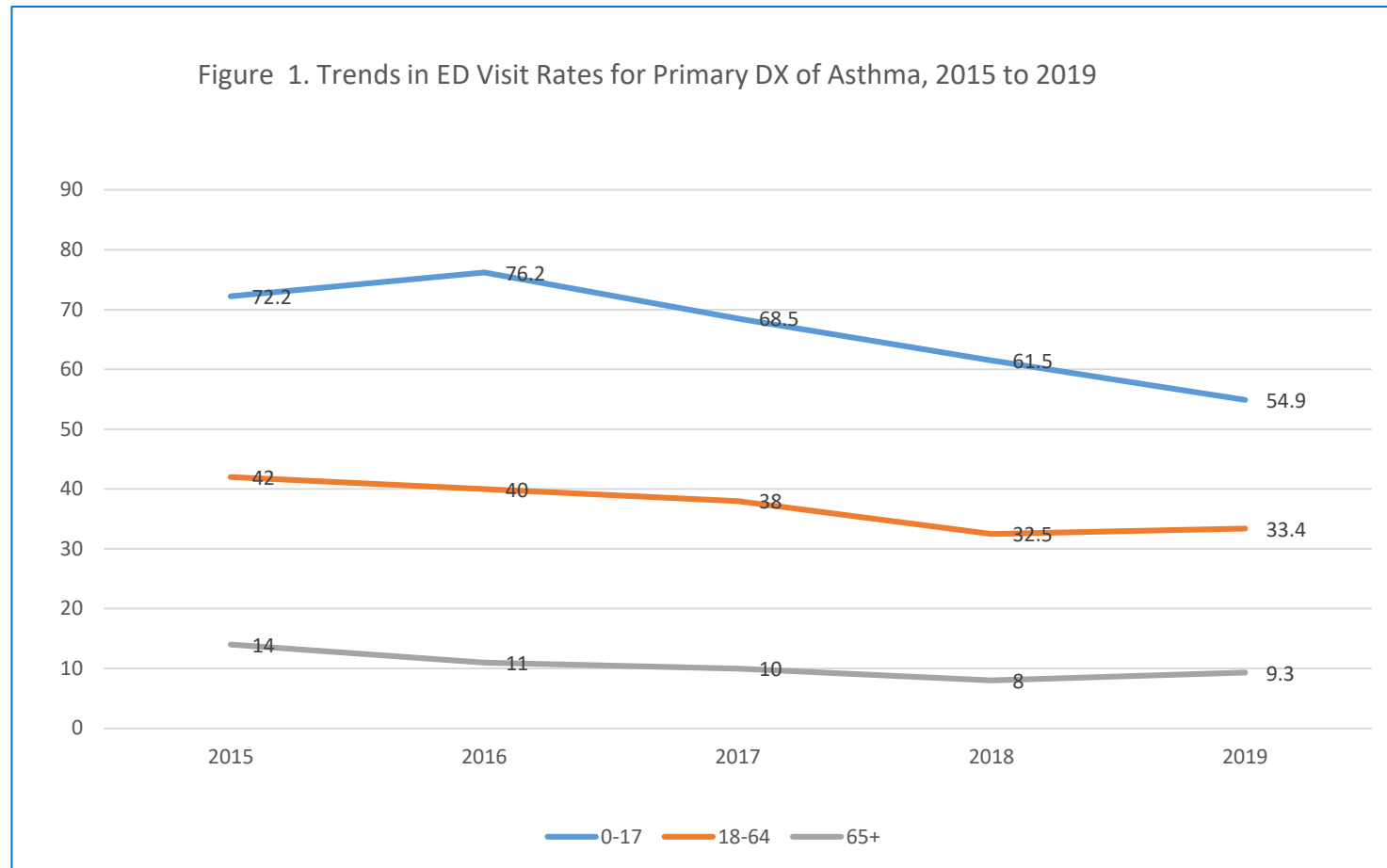


This map shows the relationship between Air quality, ozone, and traffic using EPA EJSCREEN 2018 data

# Asthma ED and Hospitalization Data



# Asthma Emergency Department Visit Rate per 10,000 Rhode Island Children and per 10,000 Rhode Island Adults, 2015 to 2019



# Trends in Pediatric Asthma Emergency Department Visits: Documenting Asthma Disparities in Rhode Island

Figure 2. Trends in Pediatric ED Visit Rates for Primary DX of Asthma Per 10,000 RI Children (statewide) by Age Groups, 2015 to 2019

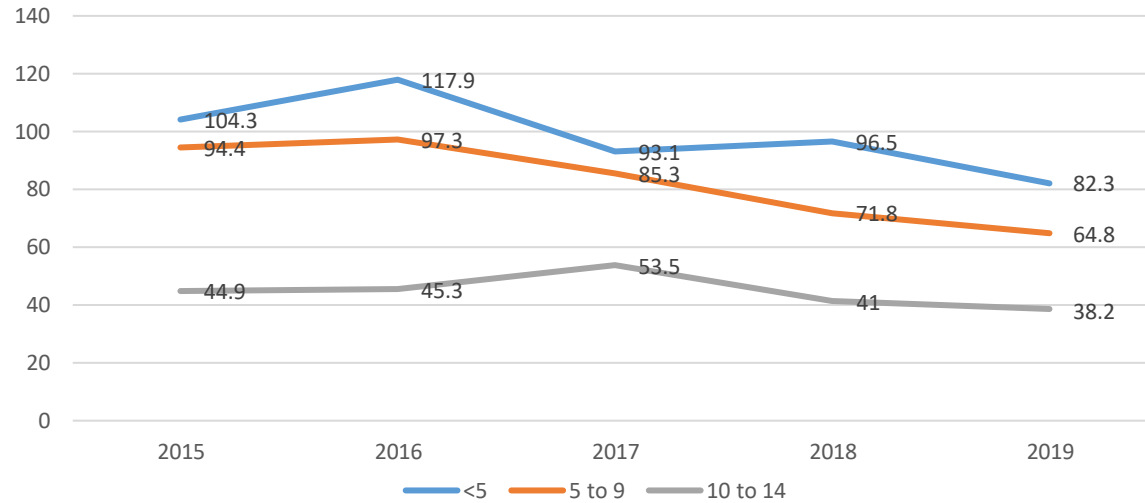
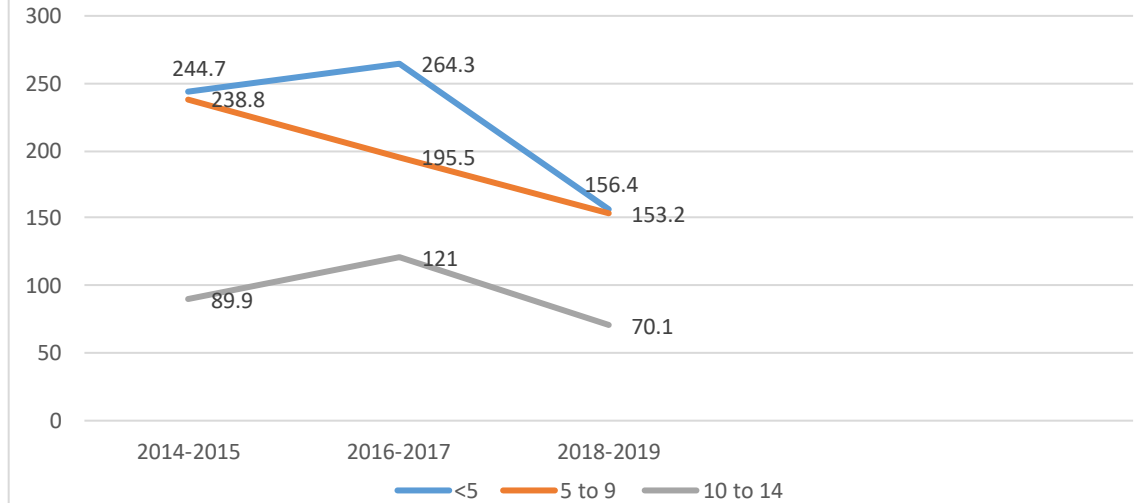


Figure 3. Trends in Pediatric ED Visit Rates for Primary DX of Asthma Per 10,000 Children in Zip Code 02907 by Age Groups, 2014 to 2019



“The asthma ED visit rate for children in each age group in zip code 02907, however, remains much higher than the asthma ED visit rate for Rhode Island children statewide.”

# Next Meeting

1<sup>st</sup> Friday of every month – Dec 3, 2021; 12:30-1:30

## Meeting Objective:

- **Identifying population of focus for asthma learning collaborative:**  
What other data do we want to consider ?
- **Review of new asthma clinical guidelines:**
  - Recommend person from Asthma Core Planning Team
- **Review of literature best practice strategies/tools**
  - Primary care practice baseline assessment: What evidence based guidelines primary care practice is presently following compared with updated clinical guidelines?
  - Patient/Family Assessment Tool : What patient/ family assessment tool could be used to obtain input on patient/ family experience with care?



---

ADVANCING INTEGRATED HEALTHCARE

# Stay Safe and Healthy



---

ADVANCING INTEGRATED HEALTHCARE

# Appendix



# CDC Performance Measures-Year 1

## September 1, 2019-August 31, 2019

- PM C: Comprehensive Service Expansion in High Burden Areas
- PM A: Analysis and Use of Core Data Sets
- PM E: Use of Evaluation Findings
- PM B: Linking Activities and Outcomes
- PM D: Quality of Guidelines-Based Care
- PM F/G: AS-ME Completion Rates and Improvement in Asthma Control Among AS-ME Completers



# CDC Performance Measures-Year 1 September 1, 2019-August 31, 2019

## PM F/G: AS-ME Completion Rates and Improvement in Asthma Control Among AS-ME Completers

### Patient Enrollment Information

Report enrollment information by asthma control status.

### Asthma Control Status on Enrollment

Enter the number of participants initiating AS-ME

Number of participants at enrollment whose asthma is well-controlled

76

Number of participants at enrollment whose asthma is poorly-controlled

128

Number of participants at enrollment with unknown asthma control status

0

# CDC Performance Measures-Year 1 September 1, 2019-August 31, 2019

## PM F/G: AS-ME Completion Rates and Improvement in Asthma Control Among AS-ME Completers

Of participants attending at least 60% of sessions

Number whose asthma is well-controlled at enrollment

Number whose asthma is poorly-controlled at enrollment

Number with no information on asthma control at enrollment

Of those attending at least 60% of sessions who had poorly controlled asthma at enrollment, how many reported follow up data?

Of those attending at least 60% of sessions who had poorly controlled asthma at enrollment, how many reported improved asthma control at some point after the final session?

