

Asthma-Friendly Provider Recognition 2021 Application

Zip Code

County

Name of Healthcare Organization:		
Mailing Address:		
Street	City	

Phone (Area Code and Number):	Fax (Area Code a	Ind Number):	1	
Specialty:	Number of Staff:	Type of Health	care Organization:	
Do you refer moderate to severe asth	nma patients to a specia	alist?	If yes, what type?	

Asthma Team Lead's Name:	
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Asthma Team Lead's Email:	
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Asthma Team Members (Names and Roles):

Provider's Name:	Provider's Email:	
Provider's Attestation: (Check below, indicate date)	Date:	
I attest that our practice achieved the criteria level indicated and the information included on the following pages is accurate.		
Mentor/Partner Organization (if applicable):	How did you hear about this recognition?	

To apply for Asthma-Friendly Provider Recognition, providers must:

- (1) Review the Asthma-Friendly Provider Application and implement criteria for the desired recognition level
- (2) Complete the application and submitto: FLAsthmaCoalition@gmail.com
- (3) Email copies of certificates for trainings completed
- (4) Email copy of Vanderbilt Pediatric Healthcare Improvement Initiative training certificate of completion
- (5) Email copies of Asthma Action Plan template being utilized along with a policy or protocol for its distribution, if applying for Silver or above
- (6) Email copies of policy, curriculum, and materials for criterion 4, if applying for Silver or above
- (7) Email copies of protocol or policies for criterion 5, if applying for Gold

Bronze

Criterion 1:Professional Development

The Asthma Team Lead has completed the <u>Asthma Management and Education Online course (AME-O)</u> within 24 months. *Attach copies of training certificate.*

All Medical Assistants have completed the <u>American Lung Association's "Asthma Basics"</u> (free online course). *Attach all individual certificates.*

Our hospital offers the Vanderbilt Pediatric Healthcare Improvement Initiative TN chapter of the American <u>Academy of Pediatrics training</u> at least once every 24 months. **Attach copies of training certificates.**

Complete National Environmental Education Foundation (NEEF) "Environmental management of Pediatric Asthma: Guidelines for Healthcare Providers" course. <u>https://neef.asentialms.com/</u>

Criterion 2: Team Based Approach

Staff use a team-based approach to promote more efficient, comprehensive, and patient-centered care so as to align services across the asthma care continuum. **Answering the questions below is required.**

Brief description of population served using a team-based approach (limit 500 characters)

Composition of team(s) and role of team members (limit 500 characters)

Method of sharing information among team members

Measures taken to ensure cultural appropriateness (if available)

Additional comments (limit 750 characters)

<u>Silver</u>

Criterion 3: Asthma Action Plans

All patients with a diagnosis of persistent asthma receive an Asthma Action Plan and are provided with instructions on how to comply with the plan. Attach a copy of the Asthma Action Plan template being utilized <u>AND</u> a copy of the policy or protocol for its distribution.

All Asthma Action Plans are required to have the following components:

- $\circ~$ A list of triggers that may cause an asthma attack to inform the patient what triggers to avoid
- Recognition of symptoms and treatment of worsening/severe asthma
- What medicine to take daily, including the specific names of the medications

<u>Gold</u>

Criterion 4: Self-Management Education

All patients with moderate or severe, persistent asthma are provided with, or referred to, self-management education that meet EPR-3 Guidelines *Attach a copy of the curriculum used and materials given to patients* AND a copy of the policy or protocol for

referring patients. Answering the questions below is required.

Recommendations for adults and children with asthma include:

- Clinicians must provide all asthma patients with asthma self-management education that includes asthma information and training in asthma management skills, symptom-based or peak flow-based self-monitoring, development of a written Asthma Action Plan and regular consistent assessment.
- Clinicians must involve patients in decisions about the type of self-monitoring (symptom-based or peak-flow based) of asthma control that they will conduct.
 Health professionals, such as clinicians, nurses, asthma-educators, etc., should be trained in asthma self-management education and implement and teach asthma self-management skills.
- Essential skills of self-management should be introduced in the first sessions of asthma self-management education and subsequent sessions should focus on tailoring and adjusting management to the needs of the patient.

Description of referral process and the services referred to (limit 500 characters):

Description of the assessment of referral timeliness and completion (if available):

Brief description of population provided with, or referred to, asthma self-management education (limit 500 characters):

Criterion 5: Multi-Component Home Based Asthma Education

All patients with severe, persistent asthma are provided information about, or referred to, multi-component homebased asthma management education. If there is not a program available to refer patients to, the asthma team is required to review and distribute the <u>Florida Asthma Coalition Home Visiting Informational Packet</u> to all patients with severe, persistent asthma. Attach a copy of the policy or protocol for providing patients with home-based education or for referring patients. Answering the questions below is required.

Description of referral process and the services referred to (limit 500 characters):

Description of the assessment of referral timeliness and completion (if available):

Brief description of population provided with information about, or referred to, a multi-component home-based asthma management education program (limit 500 characters):

Comments for both Criterion 5 & 6 (750 character limit):

Platinum

Criterion 6: Implementing an Asthma Quality Improvement Process

Health care providers serving populations with a disproportionate burden of asthma will implement an asthma quality-improvement process, following EPR-3 guidelines, to improve the quality of care and health outcomes of moderate/severe asthmatic patients. *See resources on page 6 for a guide and workbook to help get started; It is not required for providers/groups to collaborate with any government entity to complete this criterion.*

Brief description of the population receiving guidelines-based asthma care, or those whose QOC measures are collected.

Name/description of Quality Improvement (QI) process (limit 1,00 characters)

Asthma related Quality of Care (QOC) measures collected (if available) (limit 1,500 characters)

Check all health outcomes collected (if available):

Asthma control

Hospitalizations/ emergency department visits

Satisfaction with care

Additional comments you would like to add (limit 750 characters)

Asthma-related quality of life

Other, please describe below:

Resources:

Criterion 1:

- Asthma and Allergy Foundation of America's (AAFA) Asthma Management and Education Training (Please contact the Florida Asthma Coalition to request access to this course) This course recognizes the critical role allied health professionals play in educating and caring for patients with asthma. Course content conforms with the National Asthma Education and Prevention Program (NAEPP) 2007 Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma. This free program contains 11 modules of self-paced study. Upon completion of the full course, team lead will be eligible to earn 8.75 continuing education credits from the American Nurses' Credentialing Center's Commission on Accreditation (ANCC) and the American Association for Respiratory Care (AARC). https://www.aafa.org/continuing-education-for-health-care-professionals/
- The Pediatric Healthcare Improvement Initiative for Tennessee / TN chapter of the American Academy of Pediatrics Vanderbilt University has developed five videos on guidelines-based asthma care. Anyone can access these videos and CME is free. If you've never registered on this site, you will need to register and provide log in name and password, then you are able to watch the videos. AMA PRA Category 1 Credits™ (1.50 hours), Non-Physician Attendance (1.50 hours) <u>https://vumc.cloud-cme.com/course/courseoverview?P=0&EID=22183</u>

Criterion 3:

- Allergy & Asthma Network Asthma Action Plans Available in English and Spanish, which can be found on their website using the link below. <u>https://allergyasthmanetwork.org/what-is-asthma/asthma-action-plan/</u>
- American Lung Association: Asthma Action Plans
 Additionally, the American Lung Association developed an Asthma Action Plan, available in English and Spanish, through
 the Florida Department of Health website. The Asthma Action Plan can be found using the link below:
 <u>http://www.floridahealth.gov/diseases-and-conditions/asthma/_documents/afcc-appendix-a.pdf</u>

Criterion 4:

Asthma Inhaler Videos

Asthma can be controlled and asthma attacks can be avoided by taking medications as prescribed by the provider. The videos and documents provided on the link below demonstrate how to properly use inhalers. Using a metered dose inhaler with a spacer: https://youtu.be/BbONuRXJdr0

Using a metered dose inhaler (inhaler in mouth): <u>https://youtu.be/Lx_e5nXfi5w</u> Español:

Cómo usar inhalador con espaciador: <u>https://youtu.be/NdFstn28hWM</u> Cómo usar inhalador en la boca: <u>https://youtu.be/TFexVujeJVk</u>

Asthma and Allergy Foundation of America - Education Programs for Teaching Patients

Asthma and Allergy Foundation of America (AAFA) offers many patient education programs for all ages in English and Spanish, including Wee Breathers, an interactive program for health professionals who teach parents of young children about managing asthma. <u>http://www.aafa.org/page/asthma-allergy-education-programs-teach-patients.aspx</u>

• NAEPP Guidelines for the Diagnosis and Management of Asthma (EPR-3)

The National Asthma Education and Prevention Program (NAEPP), coordinated by the National Heart, Lung, and Blood Institute (NHLBI), convened an expert panel in 2007 to complete a systematic review of the published medical literature and to update the asthma guidelines to reflect the latest scientific advances. This document provides new guidance for selecting treatment based on a patient's individual needs and level of asthma control. The guidelines emphasize that while asthma can be controlled, the condition can change over time and differs among individuals and by age groups, emphasizing the importance of regularly monitoring the patient's level of asthma control and adjusting treatment as needed. https://www.nhlbi.nih.gov/health-topics/guidelines-for-diagnosis-management-of-asthma

• Guidelines Quick Reference Guide: https://www.nhlbi.nih.gov/sites/default/files/media/docs/asthma_qrg_0_0.pdf

Criterion 5:

Asthma Home Visiting Informational Packet

This informational packet was created by the Florida Asthma Coalition's Home Visiting Workgroup and can be used as a reliable tool and resource for health care professionals during Home Visits. This handout is also useful for individuals and their caregivers living with asthma to learn ways to avoid and prevent asthma triggers in the home setting.

Environmental Protection Agency: Asthma Home Environment Checklist The EPA's asthma home environment checklist guides individuals with asthma and home care visitors in identifying environmental asthma triggers most commonly found in homes. It includes sections on the building, home interior and room interior and provides low-cost action steps for remediation. http://www.epa.gov/asthma/asthma-home-environment-checklist

Criterion 6:

 Agency for Healthcare Research and Quality: Asthma Care Quality Improvement (AHRQ): A Resource Guide and Workbook for State Action

The Agency for Healthcare Research and Quality (AHRQ) has developed Asthma Care Quality Improvement: A Resource Guide for State Action and its companion workbook, Asthma Care Quality Improvement: A Workbook for State Action. These materials were designed in partnership with the Council of State Governments to help States assess the quality of asthma care and create quality improvement strategies. http://www.ahrq.gov/sites/default/files/wysiwyg/research/findings/nhgrdr/nhgr02/asthgwork.pdf

- AHRQ "Improving Asthma Care Quality" https://www.ahrq.gov/data/monahrq/mygi/asthma.html
- Vanderbilt University Quality Improvement Introduction video: PHiiT QI Training Videos QI 101 (AMA PRA)
- Category 1 Credits ™ (0.75 hours), Non-Physician Attendance (0.75 hours) <u>https://vumc.cloud-cme.com/</u> default.aspx?EID=22183&P=3000&CaseID=78