

Communities in Action NATIONAL ASTHMA FORUM

WASHINGTON, DC JUNE 17-18, 2010

Home-Based Settings Break In Cabin John/Arlington Room



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Community Asthma Prevention Program of the Children's Hospital of Philadelphia

Implementing Evidence-Based Asthma Interventions in the Community

Dr. Tyra Bryant Stephens

Community Asthma Prevention Program of the Children's Hospital of Philadelphia

- Hospital devoted to the care of children
- Population Served: 3,000 families in a city with 1.4 million, a large minority population, and 20-25% prevalence of asthma in inner-city
- Key Partners: Congreso de los Latinos, School District of the City of Philadelphia, City Department of Health, Health Promotions Council, Philadelphia Allies Against Asthma, Health Federation

Environmental Interventions in Homes

- Evidence-based home environmental management is coordinated through:
 - Referrals from CHOP's patient database, community pcp's and school nurses to identify high-risk children
 - Six home visits initially then at least monthly visits for one year
 - Evaluation of improved ability to self-manage asthma, visual assessments of the home environment and tracking health care utilization for enrolled children
 - Feedback to clinical providers

Environmental Interventions in Homes

- CAPP delivers environmental interventions in homes by:
 - Training CHWs recruited from the community to deliver in-home evidence-based asthma education and environmental mitigation
 - Reviewing symptom diaries with patients to help better manage asthma
 - Promoting self-management of environmental exposures by demonstrating medication use, asthma devices, trigger avoidance techniques, reviewing AAPs and connecting families to resources

Training Community Health Workers

- Overview of CAPP and specific project
- Basic Asthma Knowledge
- Skill building-asthma devices
- Teaching Techniques
- Mock teaching from Lesson Plans
- Scenarios encountered in the Home
- Protocol for project

CHW continued Training and Monitoring

- 1) Monthly data meetings
- 2) Demonstration of lesson for peer review
- 3) On-site observation
- 4) Buddy visits
- 5) Independent visits
- 6) Monthly booster sessions

Environmental Interventions in Homes

Activities	Outputs	Outcomes	Impact
• Train CHWs to deliver home-based asthma education, environmental home assessments and trigger mitigation	 Number of children with poorly controlled asthmareceiving home visits Number of children with AAPs that include trigger identification 	•Improved self- management of medications and home environment •Reduced exposure to environmental triggers	 Increase in QOL as measured by increased symptom free days Reduced ED visits and hospitalizations

Lessons Learned

- CHW's are great recruiters for the project
- CHW's can build valued supportive relationships with caregivers
 - Establish boundaries for CHW's and clients
 - Educate CHW's about legal ramifications
 - Important to recruit CHW's who have some experience in building relationships with clients

Lessons Learned

- Data collection has to be monitored closely
 - Review essential data elements consistently
 - Create script for CHW's when asking questions
 - Have CHW's monitor each other at monthly/weekly meetings
 - Do random chart checks
 - Create punch list for data entry clerk
- Expectations must always be inspected

Outcomes

- Six home visitors trained over 11 years. Most retained for at least 5 years
- Over 1500 families participated in Home Visit Program
- Average retention for 6 month projects- 90%
- Average retention for 12 month projects-80%

Tools for Evaluating Home-Based Asthma Interventions

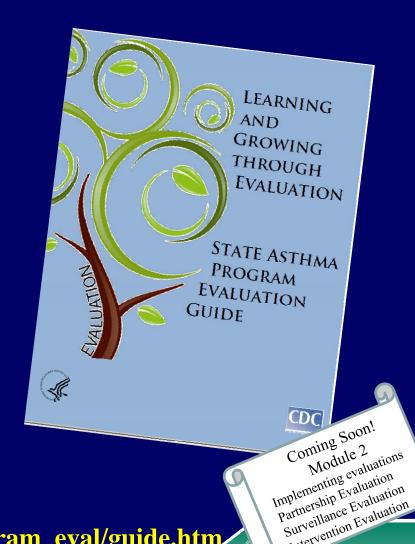
Sarah Gill

Evaluation Technical Advisor For CDC's Air Pollution and Respiratory Health Branch

The findings and conclusions in this presentation have not been formally disseminated by the Centers for Disease Control and Prevention and should not be construed to represent any agency determination or policy.

A Helpful Tool for Asthma Programs

- CDC Framework for Program **Evaluation**
- Evaluation Standards
- Impact model for state asthma programs
- Hiring an evaluator
- How to strategic evaluation plan
- How to.... individual evaluation plan
- General evaluation resources



Intervention Evaluation

Available at: http://www.cdc.gov/asthma/program_eval/guide.htm

Evaluation Plan Outline

1 INTRODUCTION

This section provides information about the purpose of the evaluation, and what stakeholders are—or need to be—involved in the evaluation.

Evaluation Purpose

- What does this evaluation strive to achieve?
- What is the purpose of this evaluation?
- How will findings from the evaluation be used?

Stakeholders

- Who are the stakeholders for this evaluation?
- What role did they play in developing this individual evaluation plan?

 How do you plan to engage these stakeholders when implementing the individual evaluation plan (e.g., participate in collecting data, help to interpret findings)?

Table F.1. Stakeholder Assessment and Engagement Plan

Stakeholder Name	Stakeholder Category	Interest or Perspective	Role in the Evaluation	How and When to Engage
	(Primary, secondary, tertiary)			

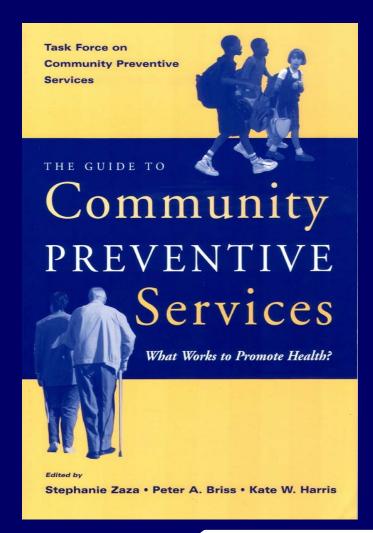
This section of the plan corresponds with Chapter 3, Step 1, of the State Asthma Program Evaluation Guide



The Community Guide

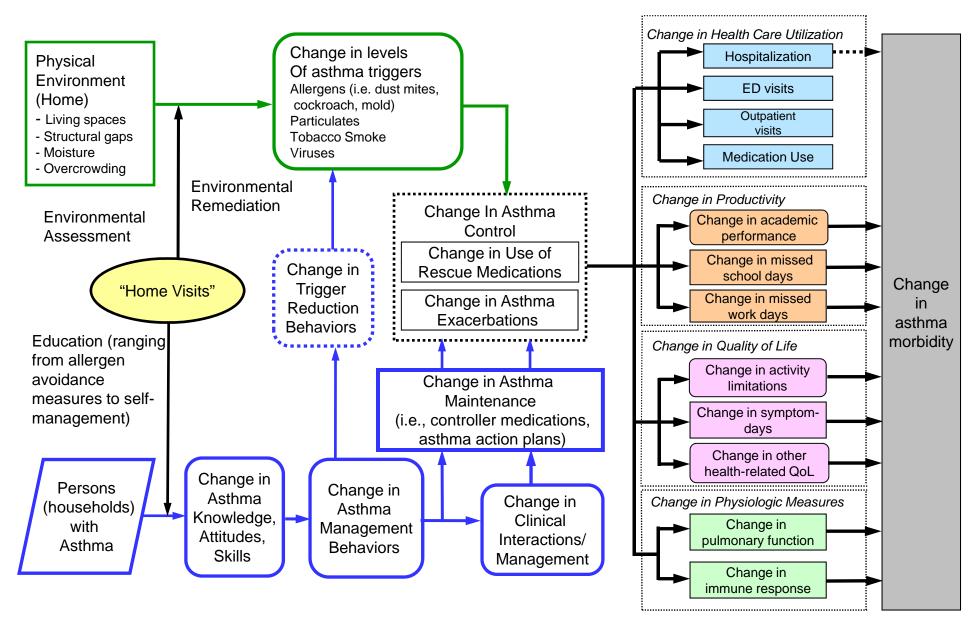
- Resource for public health
- Directed by the Task Force
 - Conducts systematic reviews
 - Makes recommendations

http://www.thecommunityguide.org





Home-based Environmental Interventions



Standards



From the Joint Committee on Standards for Educational Evaluation.

Standards included here are a subset of the standards.

Utility Standards

Intent: To ensure that an evaluation will serve the needs of intended users.

- > Stakeholder identification: People involved in or affected by the evaluation should be identified so their needs can be addressed.
- Values identification: The perspectives, procedures, and rationale used to interpret findings should be carefully described so that the bases for value judgments are clear.
- Evaluation impact: Evaluations should be planned, conducted, and reported in ways that encourage follow-through by stakeholders, so that the likelihood that the evaluation will be used is increased.



Feasibility Standards

Intent: To ensure that an evaluation will be realistic, prudent, diplomatic, and frugal.

- Practical procedures: Should be practical to keep disruption to a minimum while needed information is obtained.
- ➤ Political viability: Planned and conducted with the anticipation of different positions of interest groups, so that their cooperation may be obtained, and so that possible attempts to curtail evaluation operations or to bias or misapply results can be averted.



Propriety Standards

Intent: To ensure that an evaluation will be conducted legally, ethically, and with due regard for the welfare of those involved in the evaluation, as well as those affected by its results.

- Human interactions: Evaluations should respect human dignity and worth in their interactions with others.
- Complete and fair assessment: Evaluation should be complete and fair in examination and recording of strengths and weaknesses ...so that strengths can be built upon and problem areas addressed.
- Disclosure of findings: Formal parties to an evaluation should ensure that the full set of evaluation findings along with pertinent limitations are made accessible to people affected by the evaluation, and any others with legal rights to them.



Accuracy Standards

Intent: To ensure that an evaluation will reveal and convey technically adequate information about the features that determine worth or merit of the program being evaluated.

- Context analysis: Context is examined in detail so that influences can be identified.
- Defensible information sources: Described in enough detail so that adequacy of information can be assessed.
- > Justified conclusions: Conclusions reached should be explicitly justified so that stakeholders can assess them.



Accuracy vs. Propriety?

Eval.org, website for the American Evaluation Association.



Contact Information

Sarah Gill

sgill@cdc.gov

