

Improving Pediatric Asthma Care in the District of Columbia ("IMPACT DC")

Children's National Medical Center

A Pediatric Asthma Surveillance and Intervention Program focused on Urban Emergency Departments





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### Scope of Program

- Washington, DC
  - Pediatric asthma prevalence 20% above the national mean
  - ED visit rates among children <5y is nearly five times the national mean
  - Dramatic disparities in care and outcome
- Translational pediatric asthma care and research program
  - Established 2001 with funding from the Robert Wood Johnson Foundation
  - Staff of ten
  - Annual budget of \$600,000
  - Serves a predominately Medicaid (65%), urban, minority and disadvantaged population heavily dependent on EDs for episodic asthma care
  - Core clinical program: IMPACT DC Asthma Clinic

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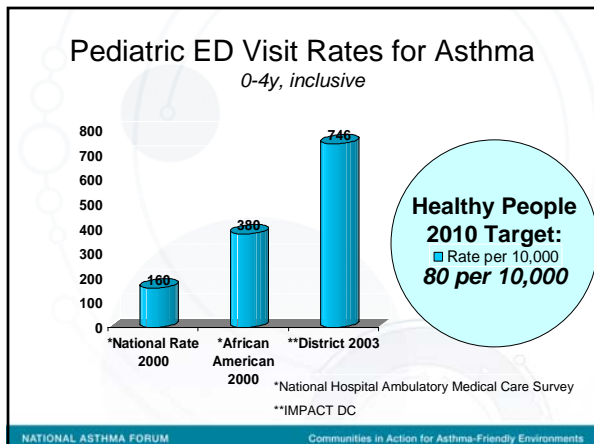
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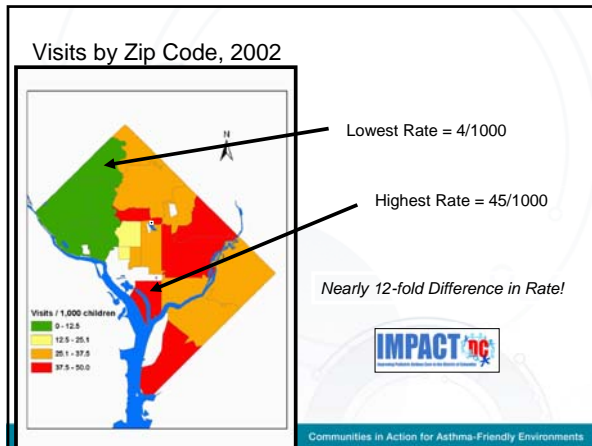
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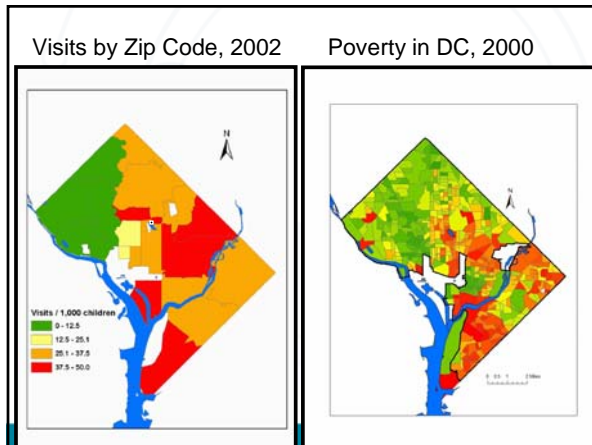
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### Key Drivers of Program Effectiveness

- ✓ **Effective Leaders & Champions**
  - Strong Project Director (Deborah Quint, MPH) and committed physicians designed, evaluated, incrementally implemented, and sustained a highly novel model of care
- ✓ **Strong Community Ties**
  - Built and validated model at our medical center, then implemented and sustained it in the community
- ✓ **High-Performing Collaborations**
  - DC Department of Health, DC Asthma Coalition, Medicaid Managed Care, School Nurses
- ✓ **Integrated Health Care Services**
  - Each child and family evaluated in the context of their primary care system, sub-specialist, school/daycare, home, and insurance provider
- ✓ **Tailored Environmental Interventions**
  - Assess triggers and then target recommendations

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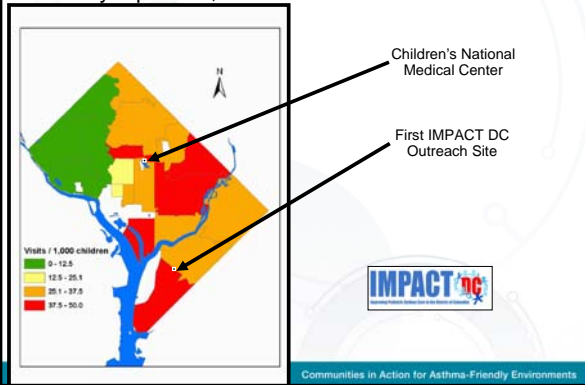
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Visits by Zip Code, 2002



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### Building the System

- Identified a problem and an initial funding source (Robert Wood Johnson Foundation)
  - Developed as a research project
- Designed a novel intervention to address the problem
  - Focus on ED recidivism
- Recruited and trained dedicated staff
  - Young, motivated, mostly recent college grads
- Made a commitment to being data driven
  - Makes arguments for funding much easier!

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### Getting Results – Evaluating the System

- Health Outcome Goals and Results
  - Reduce unscheduled visits for asthma care
- Measures & Methods
  - Comprehensive initial evaluation of intervention
  - Ongoing surveillance
- Process Outcomes
  - Deliver more care every year

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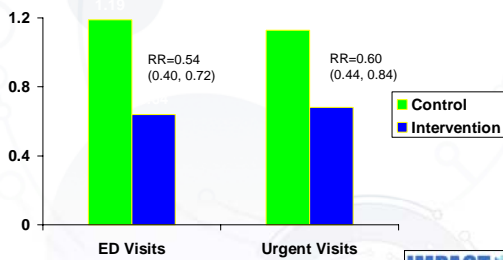
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### Effect on ED and Urgent Care Visits Over Six Months Following Intervention



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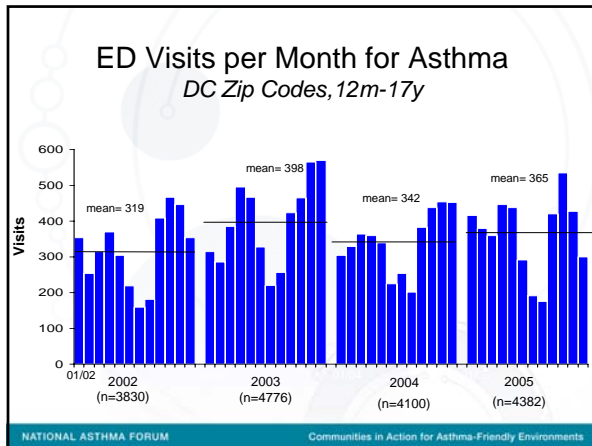
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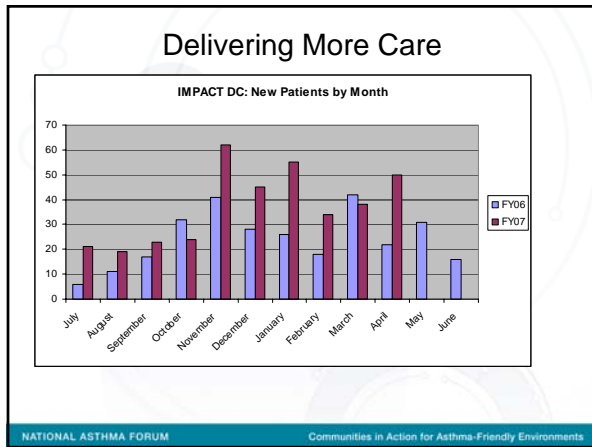
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### Resourcing the System

- Built a Diverse Portfolio of Funding
  - Fee-for-service
  - Grants and contracts
  - Philanthropy
  - In kind support from hospital and community health centers
- This job is never done...build relationships with funders and know what they're looking for

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## Epiphanies – Making it Last

### Building the System

- Build incrementally and never promise what you cannot deliver

### Key Drivers of Program Effectiveness

- Success comes from the dedication and persistence of a few key individuals – leaders and champions really matter

### Getting Results - Evaluating the System

- Data is power

### Resourcing the System

- Develop a diverse portfolio

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