Central Valley School Health Services Coalition

July 17, 2020

• Heather Berg MA, Central Valley Coalition Coordinator
• Anne Kelsey Lamb MPH, Director Regional Asthma Management & Prevention (RAMP)
AGENDA

• Introductions
• Keeping Kids in School! SBHCs as Leaders in Addressing Environmental Asthma Triggers
• Announcements and Closing
Putting Health Care in Schools

The California School-Based Health Alliance is the statewide nonprofit organization dedicated to improving the health & academic success of children & youth by advancing health services in schools.

Learn more: schoolhealthcenters.org
Keeping Kids in School!
SBHCs as Leaders in Addressing Environmental Asthma Triggers

Anne Kelsey Lamb, MPH, Director
Regional Asthma Management & Prevention (RAMP)
Presentation Objectives

Describe the role of SBHCs in reducing asthma disparities and chronic absenteeism among children and adolescents.

Identify best practices for reducing environmental asthma triggers in schools and communities that are replicable to the field.

Practice identifying environmental asthma triggers and communicating with key stakeholders about actions to reduce those triggers.
RAMP’s mission is to reduce the burden of asthma with a focus on health equity. Emphasizing both prevention and management, we build capacity, create linkages, and mobilize networks to advocate for policy and systems changes targeting the root causes of asthma disparities.
Asthma in children
7 million children under the age of 18 in the U.S. have asthma
Most common cause of disability among children in the U.S.
Leading cause of school absences due to chronic disease.
Asthma disparities by Age Group, Race/ethnicity, and Poverty Status (2013)

| Category            | %  
|---------------------|-----
| Children            | 8.3
| Adults              | 7.0
| White Non-Hispanic  | 7.7
| Black Non-Hispanic  | 11.2
| Other Non-Hispanic  | 9.4
| Total Hispanic      | 5.9
| Puerto Rican        | 14.6
| Mexican             | 4.7
| <100% poverty       | 10.9
| 100-<250% poverty   | 7.0
| 250-<450% poverty   | 6.2
| ≥ 450% poverty      | 6.6
How do we reduce the burden of asthma?

Utilize a broad and comprehensive approach that aligns with National Guidelines

- Assessment of disease severity and control
- Comprehensive pharmacologic therapy
- Patient education
- Environmental control measures to avoid or eliminate factors that contribute to asthma onset and severity
The important role of SBHCs

SBHC users are:
- Less likely to go to the ED or be hospitalized for asthma
- Less likely to have asthma-related restricted activity days
- Less likely to miss school as a result of their asthma
Underlying premise of the project:

SBHCs provide an ideal setting in which to incorporate environmental components into chronic disease management programs, leveraging their role as a strong link between the student, school, and home.
Environmental asthma triggers

Two categories: allergens and irritants

Difference between exacerbation and causation

Asthma triggers vary from one person to the next
Allergens

mold
dust mites
Allergens

cockroaches

rodents
Allergens

pets

pollen
Irritants/ pollutants

- Environmental tobacco smoke
- Chemical irritants from personal products
Irritants/ pollutants

cleaning products

pesticides
Irritants/ pollutants

gas stoves and space heaters

wood smoke
Irritants/ pollutants

outdoor air pollution
Irritants/ pollutants

outdoor air pollution
Asthma Environmental Intervention Guide
for School-Based Health Centers
Managing Asthma Triggers from School to the Home: How One School-Based Health Center is Educating a School Community

Located in Milwaukee County in Southeast Wisconsin, Frances Starsm Discovery Learning School serves a predominantly African American community (96% of students are Black, non-Hispanic) and has one of the highest rates of asthma in the state, at 22%. Contributing to these high rates of asthma are a variety of environmental factors.

Many schools in Milwaukee County are over 50 years old with limited resources to address issues such as excessive dust, mold, and pests. Many homes in this community are also old, non-owner occupied, and in various stages of disrepair, further contributing to asthma triggers. Additionally, nearly one in four (24%) adults in Milwaukee County are smokers, according to the 2016 BRFSS Tobacco Survey.

Rita Higgins, the Asthma Management Program Coordinator with the Children's Hospital of Wisconsin School Nurse Program, understands how minor factors contribute to asthma and impact students. She explains that, “asthma can result in unexplained missed classroom time for students and missed for parents.” Rita and her team at Frances Starsm Learning School recognized the need to integrate environmental asthma trigger education into existing Asthma Care Program, and through a hospital partnership, they worked to update curriculums to change how asthma education was delivered.

The revised, comprehensive approach to reducing environmental asthma triggers targeted the entire community, including students and staff. Curriculum development included:

1. A survey to help students identify triggers at school
2. Education classes to help students identify and respond to triggers
3. Role-playing scenarios and tools to help students more effectively advocate for changes at home that would reduce asthma triggers

“Managing Asthma Triggers from School to the Home: How One School-Based Health Center is Educating a School Community”

Leveraging Medicaid Delivery System Reform to Improve Asthma Management: The story of a network of 20 School-Based Health Centers in Texas

The 20 school-based health centers (SBHCs) run by the John Peter Smith Health Network serve over 40,000 children each year. There is great diversity in race, ethnicity, and English language ability and the majority of children seen are uninsured or underinsured. Tarrant County has asthma prevalence and emergency department visit rates that are higher than state or national averages. To address this, the School-Based Health Center Network leveraged their unique relationship with schools, students, and families along with the funding opportunity provided through DSRIP to launch a comprehensive asthma program.

DSRIP, the Delivery System Reform Incentive Payment, provides states with significant funding that can be used to support hospitals and other providers in changing how they provide care to Medicaid beneficiaries. Texas was one of the first three states in the country to implement DSRIP initiatives, and one of the states with the largest allocation.

The John Peter Smith Health Network has a DSRIP agreement with the state to improve asthma management for children, which led to the creation of a comprehensive asthma program that reaches 2,000 children with asthma each year.

As a first step in the program, each SBHC identifies either existing or new patients between the ages of 2 and 26 with a diagnosis of persistent asthma. During the first visit, the provider focuses on assessing asthma control, understanding history and symptoms, conducting allergy tests, and prescribing medications. They conduct one-on-one education and schedule a group asthma educational follow-up visit.

The provider learns, however, that asthma management and prevention cannot be achieved solely through clinical care. Beverly Ewing, School-Based Clinic DSRIP Nurse Practitioner, explains, “We all know that prevention starts in the home and in the environment.”

They initiated a Bilical Community Health Workers from the Community Health Department to conduct a home visit during which they educate the family about environmental asthma triggers and conduct a home assessment to identify remedial measures.

“Managing Asthma Triggers from School to the Home: How One School-Based Health Center is Educating a School Community”

Addressing Asthma and Air Pollution: How one School-Based Health Center in Los Angeles County partnered with bus drivers to reduce air pollution

Asthma is a significant concern in Carson, CA, just 14 miles south of downtown Los Angeles. The Carson Wellness Center, which provides services to students from three schools that share a common campus, as well as individuals and families in the surrounding community, has 1,400 patients with a documented diagnosis of asthma.

The clinic staff recognizes that a common environmental asthma trigger—outdoor air pollution—is something that patients, and their families, can and should control, yet it’s a significant problem in their community. The Carson Wellness Center sent a survey to the students and received an overwhelming response of 84% who knew the bus riders were an issue and 81% who stated they would be willing to participate in a program designed to reduce bus riders.

The clinic staff believes that a common environmental asthma trigger—outdoor air pollution—is something that patients, and their families, can and should control, yet it’s a significant problem in their community. The Carson Wellness Center sent a survey to the students and received an overwhelming response of 84% who knew the bus riders were an issue and 81% who stated they would be willing to participate in a program designed to reduce bus riders.

The Carson Wellness Center partnered with the Carson Unified School District to develop a program to reduce bus riders. The program included a survey of the bus riders to gauge their satisfaction with the service, and to identify areas for improvement. The survey was conducted by the Carson Wellness Center staff and included questions about the riders’ perceptions of the bus service, as well as their interest in participating in a program to reduce bus riders.

“Managing Asthma Triggers from School to the Home: How One School-Based Health Center is Educating a School Community”

Lessons Learned

SBHCs are uniquely positioned to do this work!

- Passionate, knowledgeable staff.
- Focus on low-income communities/communities of color.
- Link between child, school, family, clinical systems.
- Have more flexibility in working with schools.
- Adept at doing more with less.
Lessons Learned

6 TIPS FOR SUCCESS

1. Select an intervention
2. Build relationships & get buy-in
3. Achieve success with your community
4. Develop a plan of action & implement the work
5. Connect with others & expand your impact
6. Assess the problem creatively
TIP #1
Assess the Problem

- You’ll want to select an intervention that addresses the greatest needs in your community.
Start with the At-A-Glance tool on page 54 that lists all of the interventions you might consider.

Then flip to the corresponding chapter for details on any intervention that looks like a good fit.
TIP #3

Build Relationships and Get Buy-In

- Your ability to build and maintain relationships is key to any work you do, particularly for interventions that require people to make changes to their behaviors or other environments.
Your target audience may be school staff, students, parents/caregivers, or all of the above.
Meet them where they are at—literally and figuratively.
**Develop a Plan of Action & Implement the Work**

**Asthma Environmental Intervention Work Plan**

Selected intervention or goal: 

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<tr>
<th>Activity</th>
<th>Who is responsible/ who needs to be involved</th>
<th>Timeline</th>
<th>Outcome/ impact</th>
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• You’re already connecting with others doing similar work!
• Find ways to sustain your work.
• Go ahead and brag!
Activity Time!
Activity Time!
Communicating about Asthma Triggers

In your groups, list:

What are some environmental asthma triggers that you would expect to find in a student’s home, specifically their bedroom?

What are some environmental asthma triggers that are likely present at your school?
Activity Time!
Communicating about Asthma Triggers

Let’s assume that your lists of triggers were actually developed through an environmental assessment.

In your groups, answer:

How would you communicate this to the teenager/their parent/their guardian/their family member, etc. about the triggers in the bedroom? Choose one person.

How would you communicate this to the teacher, principal, maintenance staff, etc. about the classroom triggers? Choose one person.
Discussion

Who has some examples of how they would communicate that they would like to share?

What challenges do you anticipate in discussing asthma triggers?

What needs to be in place for a successful discussion?
Things We’ve Learned: Communication Tips

Don’t be judgmental. These are really common asthma triggers.

Educate about the impact of the triggers on asthma (see guide for scientific data).

Talk about easy steps for reducing those triggers.

Ask which triggers they feel like they can reduce.

Ask them to commit to one or more changes.
Thank you
Contact Information

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2020 Virtual School Health Advocacy Day

Your Voice Matters! Advocate for School Health

Wednesday, August 5, 9:00 am - 12:00 pm PT

Please sign up today. We need you!

Join school health providers and youth as we tell state legislators and policymakers via Zoom about the important work you do to support healthy students and what your communities are facing as schools prepare for the fall.
We are holding our first *virtual* statewide conference – *School Health on the Frontlines: Navigating Pandemics & Building Equity* – October 6-8. Stay tuned for registration information!
Announcements?

Upcoming Meetings: Mental Health Sessions, Site Tour

Annual Convening: Feb 23, 2021 (tentative)

Past Convening and Other Resources:
https://www.schoolhealthcenters.org

Feedback/ideas to Heather: heberg@csufresno.edu