



Louisiana Hospital Initiative
Asthma Inpatient and Emergency Department
Discharge Protocol

2011-2012 Report



Background:

Louisiana currently ranks 49th in the United Health Foundation Health Ranking which is unchanged from 2010. Some of the state's challenges highlighted in the United Health Ranking Report are a high rate of preventable hospitalizations, high percentage of children in poverty and high prevalence of smoking. Preventable hospitalization conditions include adult asthma and chronic pulmonary function disease as well as other ailments. Preventable hospitalizations reflect that adults in Louisiana overuse the hospital setting as a site for care rather than relying on their primary care physician and outpatient care where the patient can receive patient-centered care to improve their ability to manage their condition. The high poverty rate among children presents challenges reflected in the high number of children who are hospitalized and the increasing number of Medicaid claims for children with asthma in the state. As a result of these findings, in 2008 the Louisiana Asthma Surveillance Collaborative which serves as the state's steering committee on asthma welcomed Jennifer Cofer to present on Mississippi's efforts to address hospital admissions for asthma. After receiving funding from the Centers for Disease Control (CDC), the state's coalition collaborated with Monica Stinson of the Mississippi Department of Health Office of Health Data & Research and Eugenia King who serves as the Health Promotions Coordinator for the American Lung Association of the Plains Gulf Region in Mississippi. In 2010, Louisiana worked with the state of Mississippi to adopt this hospital discharge protocol to address the high admissions for asthma patients in the inpatient and emergency department setting. Upon adoption, the Louisiana Asthma Surveillance Collaborative Healthcare Education Workgroup made some modifications to address Louisiana's needs and reported those

changes to the state's partners in Mississippi to acquire feedback and support of implementation.

What is F.L.A.R.E.?

F.L.A.R.E. is an evidence-based asthma education discharge protocol that helps hospitals implement the patient education components of the National Institutes of Health (NIH) Guidelines for the Diagnosis and Management of Asthma. F.L.A.R.E. includes five key messages to help asthma patients better manage their disease:

F – Follow up with a primary doctor;

L – Learn about asthma medicines;

A – Asthma is a life-long disease;

R – Respond to warning signs that asthma is getting worse; and

E – Emergency care may be needed if certain symptoms occur

The Louisiana F.L.A.R.E. Discharge Protocol was adopted from the state of Mississippi and revised by the Louisiana Asthma Surveillance Collaborative (LASC). The LASC Healthcare Education Workgroup assisted the Louisiana Asthma Management and Prevention (LAMP) Program in establishing a protocol that assists hospitals in providing patient-centered education at the point of discharge. The Louisiana F.L.A.R.E Protocol establishes partnerships or works with existing partnerships between the local hospital and the patient's medical home. The LAMP Program seeks partnerships at the parish level that allows the patient to flow from the hospital to the clinic setting where the patient can receive additional education about their condition and environmental conditions that could exacerbate their asthma. In the Louisiana F.L.A.R.E Pilot Protocol, Morehouse General Hospital, which is located in rural Morehouse Parish and Office of Public Health Public Health Region 8, partnered with the Morehouse General Physician's Clinic to provide a source for patients to

be referred upon discharge and allow the hospital to track and provide further assessments for the patient. In the Louisiana F.L.A.R.E Pilot Protocol, patients receive education at bedside by a respiratory specialist or highly trained nurse around asthma, symptoms of asthma, asthma triggers, medications, the zones of the asthma action plan and possible reasons for the patient's condition worsening. Besides providing patient education at the point of discharge, the Louisiana F.L.A.R.E. helps hospitals meet the NIH Asthma Guidelines and aims to decrease repeat asthma discharges.

F.L.A.R.E Training:

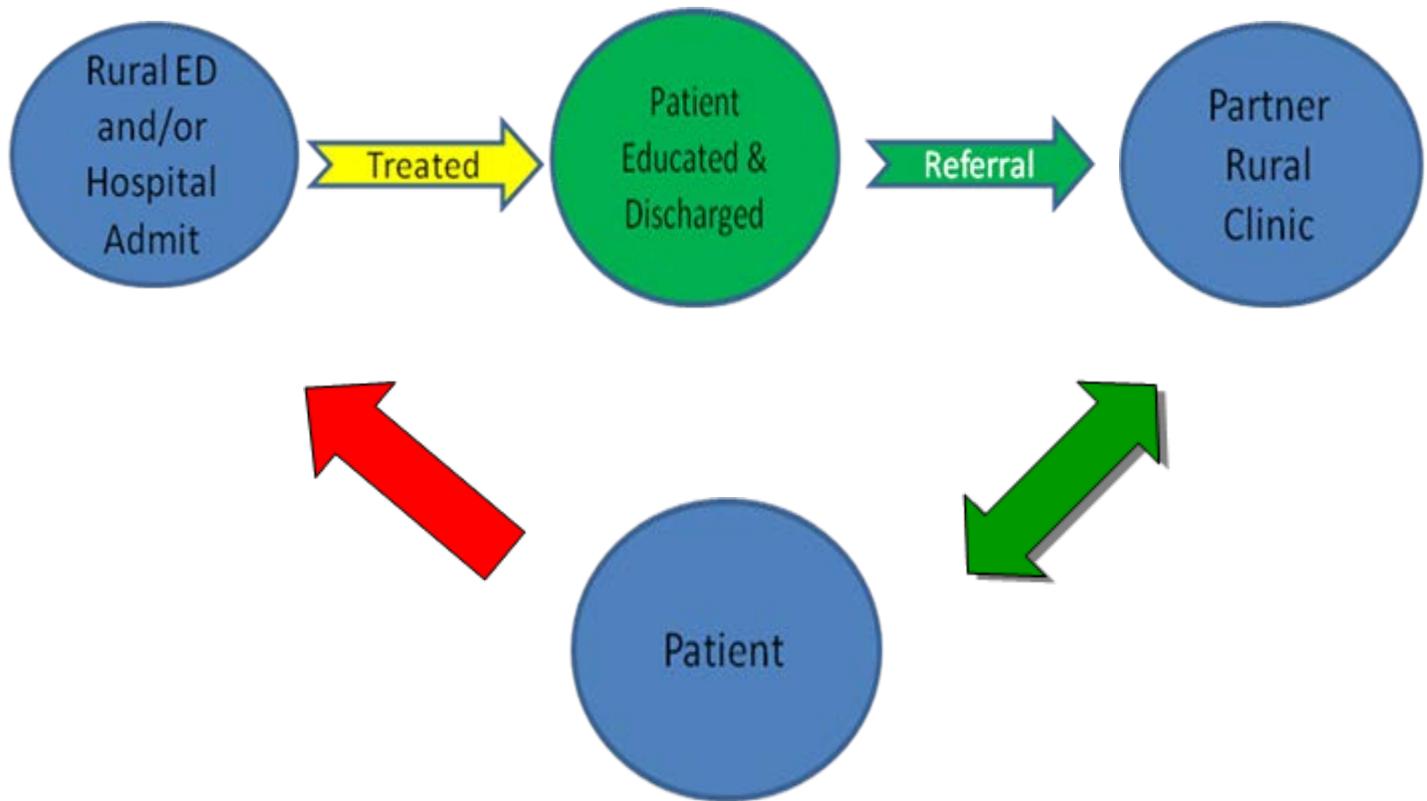
Morehouse General Hospital and the Morehouse General Physician's Clinic staff participated in two hour training in September 2011 which was provided by a highly trained Respiratory Therapist, Certified Asthma Educator (AE-C) and the LAMP Program Manager. The training consisted of ten clinicians who were identified by Stephen R. Pitts, Chief Executive Officer and the Valonde Moore, Director of Respiratory Care for the hospital. The clinic is directed by Renita Bryant, Nurse Practitioner who supervises a staff of four clinicians. All training participants received the Louisiana Asthma Health Care Provider Toolkit, color copies of F.L.A.R.E. discharge packet for inpatient and emergency departments, as well as the Louisiana Asthma Management & Prevention Program (LAMP) Asthma Action Plan and the F.L.A.R.E Patient Follow-up Referral Form. As part of the F.L.A.R.E. Training Initiative, the LAMP Program will provide additional trainings as needed for staff in hospitals planning to implement F.L.A.R.E. The required training provides participants with increased knowledge of the National Heart, Lung and Blood Institutes Expert Panel Review-3 Asthma Clinical Guidelines as well as the implementation

of the F.L.A.R.E Discharge Protocol. The training is an engaging process that allows the hospital and clinic staff to provide feedback regarding the implementation process and how their facility and staff can be successful during the process as well as potential challenges that the process may present. This also provides an opportunity for participants to assure key positions are identified and defined such as inpatient lead, emergency lead, day and night shift lead and clinic lead. Participants also identify ancillary staff that will play roles in faxing and tracking documentation from the hospital to the clinic and to the Department of Health and Hospitals on a recurring basis.

F.L.A.R.E Implementation:

Following the September 2011 training, Morehouse General Hospital fully implemented the F.L.A.R.E Discharge Protocol in partnership with Morehouse General Physician's Clinic. The process required hospital staff to provide education at discharge along with immediate (72 hour) follow-up instructions for the patient and a blank Louisiana Asthma Action Plan. Upon discharge, the patient is advised to seek follow-up care from a healthcare provider. If the patient is identified as having a gap in preventive care provided by a medical home, the patient is referred to the Morehouse General Clinic. Patients who are referred must agree to complete the patient fax referral form that provides non-confidential patient information, availability for a follow-up clinic visit and signature illustrating approval to be referred. Once the clinic receives the fax referral form, the patient is proactively contacted by the clinic staff within the 72 hour discharge period. The model on page 5 illustrates the process of how the patient flows through the process.

Patient Center Education Flow Chart



The Louisiana F.L.A.R.E. Asthma Discharge Protocol Pilot Program for rural hospitals provides the patient with a delivery system that emphasizes patient education. The patient is connected to a medical home to receive follow-up care upon discharge from the hospital or emergency department. In the flow chart above, the patient is presented to the hospital for inpatient or emergency department care; then provided asthma treatment from a healthcare provider that has been trained on the Expert Panel Review-3 Asthma Guidelines. Upon discharge, the patient receives education from the hospital clinician and/or respiratory specialist and is then referred to the clinic for follow-up care and education through the fax referral process.

Evaluations:

As a part of the evaluation component, the LAMP Program utilized process measures to assess the initiative and respond to the needs of the participating facilities on a quarterly

basis. The LAMP Program Manager and Program Evaluator worked closely with Morehouse General Hospital staff to collect data as illustrated in the attached F.L.A.R.E Hospital Data Reporting Form which includes the total number of patients referred to the clinic, number of patients contacted by the clinic, and total number of patients who followed up after being contacted and scheduled for a visit based on their availability. Two data sets were provided from inpatient and emergency department discharge where most patients were released from the emergency department. Morehouse General Hospital has a higher volume of uninsured than underinsured and private insured patients so there was no need to collect data on overall asthma patients discharge from the hospital as all patients with an asthma discharge-related group was referred to the clinic. The participating clinic provided quarterly updates that allow the LAMP Program Evaluator and Manager to track progress and provide technical assistance as needed. The LAMP Program Manager participated in four conference calls and two site visits with the Director of Respiratory Care and the Clinic Director where valuable information about the implementation process was shared and caveats were addressed. As a result of the initiative, a little more than 35% of patients discharged and referred received follow-up care. Overall, there were a low number of patients who received care through the two facilities with a diagnosis of asthma. According to the Director of Respiratory Care for Morehouse General Hospital, the low number of patients admitted can be attributed to the unusually shorten winter season in North Louisiana. Additional data identifies Morehouse Parish as being one of the top ten parishes as it relates to adult asthma prevalence but neighboring Ouachita Parish shows higher hospital inpatients visits. The majority of these patients who received service for asthma at Morehouse General Hospital

were adult patients and all patients received a respiratory examination by the clinic staff, adjusted medications with instructions, and education about how to use medications and devices and a completed Asthma Action Plan. Some patients were referred for a Pulmonary Function Test (PFT) in order to further assess their condition.

Morehouse General Hospital/Clinic Data Reporting Form

2011-2012

Reporting Period: October 1, 2011-August 31, 2012

Name of Clinic: Morehouse General Hospitals Physician's Clinic

Completed by: Renita Bryant, NP

Number of referrals received from Emergency Department Discharge		Number of referrals contacted	Number of referrals seen in clinic
October 2011	5	5	2
November 2011	8	8	3
December 2011	1	1	1
January 2012	2	2	0
February 2012	10	10	3
March 2012	3	3	1

April 2012	0	0	0
May 2012	2	2	0
June 2012	5	5	2
July 2012	2	1	1
August 2012	4	4	2
Emergency Department Discharge Totals	42	42	15

Number of referrals received from Inpatient Discharge		Number of referrals contacted	Number of referrals seen in clinic
October 2011	3	3	1
November 2011	2	2	0
December 2011	4	4	1
January 2012	1	1	0
February 2012	3	3	1
March 2012	0	0	0
April 2012	0	0	0
May 2012	1	1	0
June 2012	0	0	0
July 2012	2	2	1

August 2012	0	0	0
Inpatient Stay Totals	16	16	4
Totals for Emergency and Inpatient Discharge	58	58	19 total Annual Follow-up rate = 32%

Lessons Learned from F.L.A.R.E:

- In the event that the facility serves various payer mixes, the program should collect overall data on the total number of patients discharged from inpatient and the emergency department in order to compare it to the number of those who were identified as having a gap in having a medical home.
- Since there is ambiguity regarding providing and coding for reimbursement for asthma education in this type of process, work has to be done with the healthcare facilities to measure the cost benefit of the initiative. In this case, the hospital established a short term goal of increasing the number of patients who received Pulmonary Function Test (PFT) while the clinic established a short term goal of increasing the number of patients who visited the clinic.
- Only one adult patient who was seen in the clinic had ever heard of an Asthma Action Plan so there is a need for increasing education and awareness through community outreach efforts and on the importance of Asthma Action Plans.
- There is a need to continue educating physicians on the importance of Asthma Action Plans for their patients as patients are having issues remembering instructions on controller medications as well as overuse of quick relief medication.
- Some patients were non-compliant with follow up after agreeing to participate.
- There was a high volume of repeat patients which illustrates there is a need for a cultural change to get patients to begin thinking proactively about their condition.
- Some emergency department patients who were uninsured could not afford the fee-for-service that was required by the clinic so this was a reason for several no shows.

- No allowable billable service for the hospital in providing education at bedside posed a potential threat.
- High numbers of patients are seeking care outside of Morehouse Parish in neighboring Ouachita Parish where there is a greater capacity, increased number of beds and one of the state's public hospitals that focus on the uninsured population.

Successes from F.L.A.R.E:

- Patients tended to agree to receive follow-up care from the clinic even after identifying themselves as having a medical home and primary care physician. Many patients felt that their physician was not providing key information that the staff at Morehouse General Hospital provided at bedside through the F.L.A.R.E initiative.
- Pulmonary Function Tests increased between December and February which was a goal of the hospital.
- F.L.A.R.E has provided the only managed plan for patients in and around Morehouse Parish. Physicians lacked a comprehensive Asthma Action Plan prior to working with the state asthma program.
- F.L.A.R.E providers indicated that the resource provided by the state asthma program was easy for hospital and clinic staff to utilize with patients.
- Morehouse General Hospital agrees that F.L.A.R.E. has become an important component of patient care and will continue to provide care utilizing this model.

Next Steps:

The LAMP Program and the LASC is moving forward with working with two of Louisiana's top hospitals to implement the F.L.A.R.E Discharge Protocol. St. Elizabeth's Hospital which is located in rural Ascension Parish Office of Public Health Region 2 has 95 certified beds and serves a population around 110,000. St. Elizabeth's Hospital has been working with the LASC to establish an asthma education clinic in the facility that will incorporate a physician, respiratory therapist and certified asthma educators to provide education to patients that are discharged from the hospital. The referral process is currently being revised due to lessons learned from Morehouse General Hospital. The goal is to see a high percentage of uninsured adults and pediatric asthma patients that are currently contributing to increasing hospital expenditures.

St. Francis Medical Center which is located in rural Ouachita Parish, Office of Public Health Region 8 has more than 300 beds and serves a population of more than 150,000. St. Francis Medical Center began its partnership with the LAMP Program after learning about the F.L.A.R.E. initiative from the Greater Monroe Area Asthma Regional Coalition. St. Francis Medical Center and St. Elizabeth's Hospital will participate in F.L.A.R.E Discharge Protocol Training during the 2011-2012 Asthma Clinical Guideline Trainings.

