# **Pediatric Asthma** Guideline Checklist

Organizations working with Community Health Worker Level 1



## The current state of the issue

Asthma is the most common chronic disease among children, with many potential risk factors including smoking, obesity, family history, and environmental triggers, and adverse childhood experiences.1,2 In Washington state nearly 120,000 youth have been diagnosed with asthma.3 Over one year in Washington state, 28% of youth with asthma lacked routine healthcare visits, and one in five visited an emergency room to manage asthma symptoms.4 Poor control of asthma can lead to chronic absenteeism and affect the academic success of children. Frequently, the burden of asthma in the United States falls disproportionately on Black, Hispanic, and American Indian/Alaska Native people.5

## Home based interventions

Be tailored to diverse populations and programs, with expanded outreach for patients
and families experiencing asthma disparities.
Target services toward patients with not well or poorly controlled asthma. Conduct
risk stratification to identify candidates for home-based interventions.

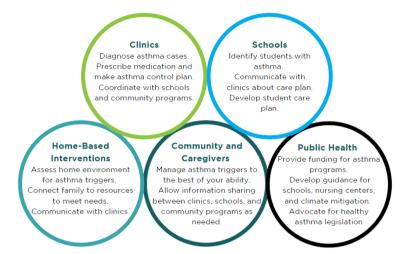
### **Environmental activities**

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nd	oor asthma triggers, including allergens and irritants. These interventions should
ncl	ude home visits by trained personnel to:
_	Provide asthma self-management education on environmental triggers.
_	Assess the home environment for asthma triggers using trained personnel.  Refer to home modification services (e.g., mold removal, furnace replacement), where
U	necessary (and available) to bring asthma under control.
	Encourage smoke-free environments.
	Promote smoking cessation to reduce exposure to second-hand smoke from tobacco,
	vape products, and cannabis.

#### Non-environmental activities

Provide motivational interviewing and goal setting to improve asthma self-
management.
Educate on general asthma self-care including medication adherence, inhaler
technique, symptom management, and trigger assessment/reduction
Combine asthma-related interventions with other health interventions, such as
teaching lead-poisoning prevention and offering vaccinations.

#### Model for communication across health care stakeholders



#### Resources

- The Bree Report on Pediatric Asthma is meant to supplement these resources.
- Full Bree Report on Pediatric Asthma: <a href="https://www.qualityhealth.org/bree/wp-content/uploads/sites/8/2023/01/Bree-Pediatric-Asthma-Report-Final.pdf">https://www.qualityhealth.org/bree/wp-content/uploads/sites/8/2023/01/Bree-Pediatric-Asthma-Report-Final.pdf</a>
- National Asthma Education and Prevention Program: <a href="https://www.nhlbi.nih.gov/science/national-asthma-education-and-prevention-program-coordinating-committee-naeppcc">https://www.nhlbi.nih.gov/science/national-asthma-education-and-prevention-program-coordinating-committee-naeppcc</a>
- CDC's Community Preventative Service Task Force-Asthma Control: <a href="https://www.thecommunityguide.org/media/pdf/Asthma-Home-Based-Children.pdf">https://www.thecommunityguide.org/media/pdf/Asthma-Home-Based-Children.pdf</a>
- Washington State's Asthma Management in Educational Settings Guide: <a href="https://ospi.k12.wa.us/sites/default/files/public/healthservices/pubdocs/asthmamanual.pdf">https://ospi.k12.wa.us/sites/default/files/public/healthservices/pubdocs/asthmamanual.pdf</a>
- Asthma and Allergy Foundation of America: <a href="https://aafa.org/asthma-allergy-research/our-research/climate-health/">https://aafa.org/asthma-allergy-research/our-research/climate-health/</a>

# Read the full Bree Report on Pediatric Asthma online by scanning the QR code:



### Connect with the Bree Collaborative at bree@qualityhealth.org