

**GET  in the  
ZONE**  
**Asthma Education through  
Problem-based Learning**

Project Summary



# “Get In The Zone” Project Overview

- Facts about ICAAP
- Background on practice-based education
- Summary of “Get In The Zone – Phase I”
  - Need for program
  - Results
- Updates from “Get In The Zone” Phases II and III



# Facts About ICAAP

- Membership organization serving over 2300 pediatricians in Illinois
- Active in provider education, school health policy, resident education, and advocacy
- Publishes a quarterly newsletter – the Illinois Pediatrician
- More information on Web site at [www.illinoisaap.org](http://www.illinoisaap.org)



## Practice-Based Education

- Presentations are given at pediatric offices
- Curriculum is tailored to the needs of each individual practice
- Information is given to entire practice staff simultaneously (MD's, NP's, nurses, receptionists, etc.)
- On-site presentation allows for examination of current practice behaviors and goal-setting



## Introduction – Basis for program

- Asthma morbidity and mortality continue to rise despite published national guidelines
- Pulmonary function testing is underutilized by primary care physicians in the management of asthma
- Asthma education is challenging due to time constraints and physician access



## “Get In The Zone” – Phase I Summary

- Curriculum was developed by Sai Nimmagadda, MD, FAAP – pediatric allergist, and Carol Jones, RN, AE-C – certified nurse asthma education
- 8 hours of CME credit was provided
- 7 pediatric practices from the Chicago metropolitan area participated in Phase I between June 2001-May 2002
- 66 pediatric healthcare professionals received updated asthma management training



# Methods

- Practice survey questionnaire of each provider – established needs assessment of individual practice
- Pre-program chart review – established baseline of asthma treatment practices
- Three practice visits – delivered three components of the curriculum
- Onsite evaluation – provided feedback on quality of the educational experience
- Post-program chart review – demonstrated changes in asthma treatment practices as a result of training
- Six-month follow-up – measured knowledge retention and continual utilization of skills taught in training



# Practice Visits

## Visit 1

- Chart reviews
- Introduction to proper in-office use of spirometry and interpretation of spirometry readings

## Visit 2

- Lecture reviewing asthma pathophysiology, pharmacology, and 1997 NHLBI asthma treatment guidelines
- Hands-on demonstration of asthma gadgets and review of patient education materials including asthma treatment plans, and environmental triggers
- Problem-based learning session involving audience participation and a case study
- Review of spirometry curves and actual interpretations

## Visit 3

- Chart review
- Review of all material
- Completion of on-site evaluation
- Q & A Session

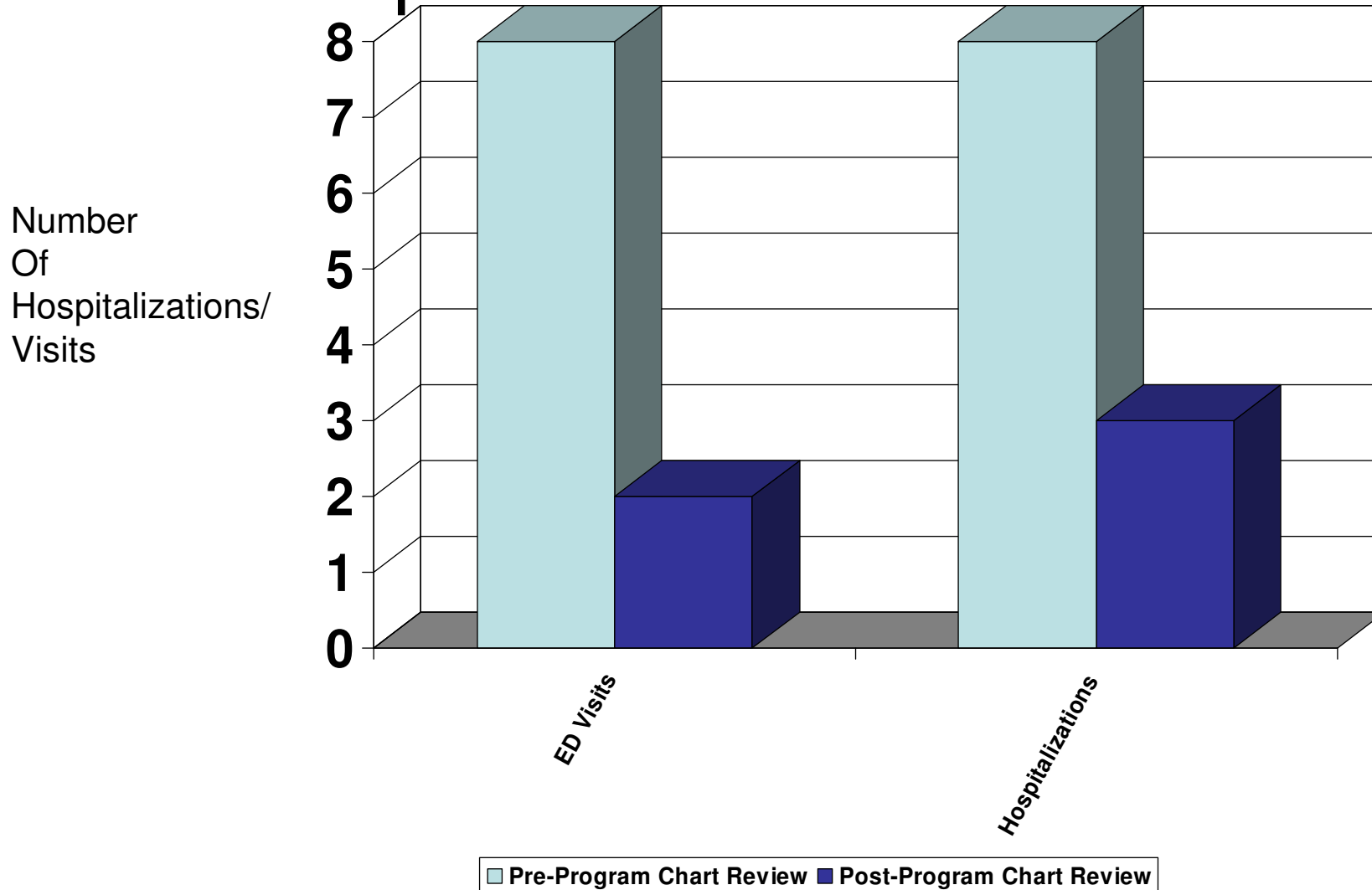


## Results of Six-month Follow-up

- 99% with favorable evaluations
- 5 out of the 7 offices ordered spirometry machines for their offices
- Continued spirometry use resulted in improved asthma control and reductions in ED visits as well as hospitalizations

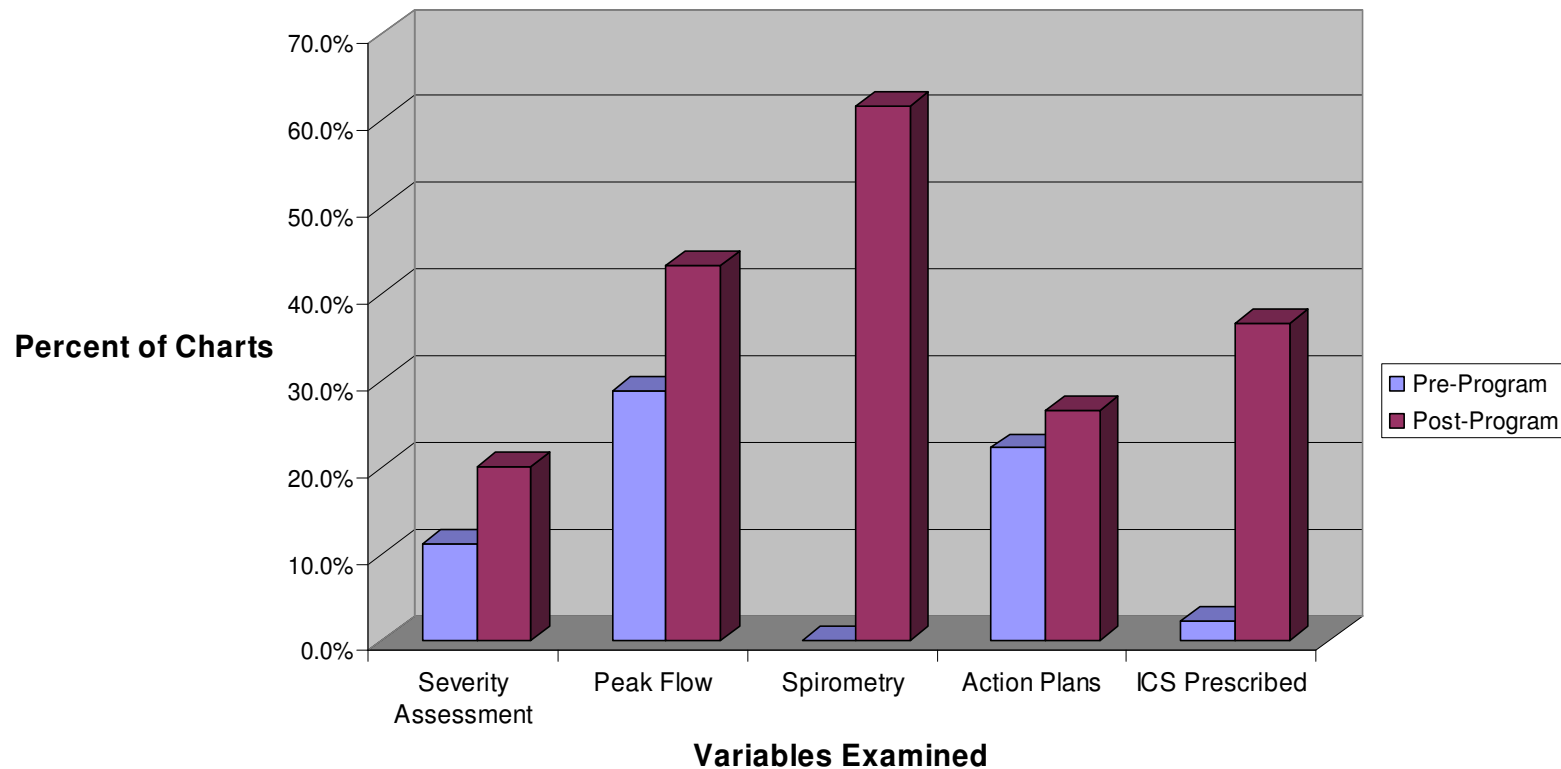


# Significant Reduction in Hospitalizations and ER visits





## GITZ Phase I - Selected Results





# Phase II Update

- Phase II timeline: January 2003-March 2004
- 169 total trained
- Curriculum revised to include 2002 updates to the 1997 NHLBI guidelines
- Presentation format shortened
- Program approved for 6.5 CME hours by the AAP and 6.3 contact hours for nurses through the INA
- Evaluation results demonstrated over 90% of respondents:
  - agree that the program met objectives
  - they gained useful/helpful information
  - they would encourage others to attend



# Phase III Update

- Phase III Timeline: April 2004 – December 2004
- 236 total trained in 23 practices
- Curriculum revised to include spirometry
- Phase III approved for 8 hours of category 1 CME through the AAP and program is still approved for 6.3 contact hours for nurses through the INA
- ICAAP received grant from IDPH to revise and shorten curriculum to present in areas earmarked to receive grants to start asthma coalitions



## Preliminary Results from Phase III

- Thus far 3 practices have submitted their six-month follow-ups
- Results have been positive, particularly in the usage/implementation of spirometry



# Conclusions

- Practice-based provider education is an effective means of training
- Spirometry can be utilized in pediatric offices with proper education and training
- The “Get In The Zone” asthma program improves asthma severity classification, management and treatment



## Contact Information

- Michelle Esquivel, MPH  
Asthma Project Manager
- Phone number 312-733-3267
- E-mail [mesquivel@illinoisAAP.com](mailto:mesquivel@illinoisAAP.com)
- Presentations are currently being scheduled for “Phase IV”
  - Free
  - Food provided
  - Participating practices receive patient education materials including copy-ready handouts and CD, as well as access to spirometer