



# 2021 LEAD Capstone Poster Session

## **Erasing the Fear** **Improving Access to Pediatric Pulmonary Care after PICU admission for Status Asthmaticus**

Folashade Afolabi, MD  
Assistant Professor  
Department of Pediatrics  
Division of Pulmonary and Sleep Medicine



# Abstract

- Lack of follow-up care to a specialist after a PICU admission has been assumed to be secondary to challenges with scheduling. Patients scheduled for appointments often miss them due to additional barriers. I have created an algorithm to increase outpatient follow-up of children with asthma admitted to the PICU for status asthmaticus to be seen by a specialist to improve control of asthma.



# Objectives

- To improve outpatient specialist follow up of children admitted with asthma to the PICU
- Reduce number of exacerbations requiring PICU admission
- Provide families with resources to aid in follow up



# Background Information

- Children admitted to the PICU for status asthmaticus requiring positive pressure have life-threatening, high risk severe persistent asthma. Per NHLBI NAEPP asthma guidelines these children should be followed by an asthma specialist at least every 3 months.

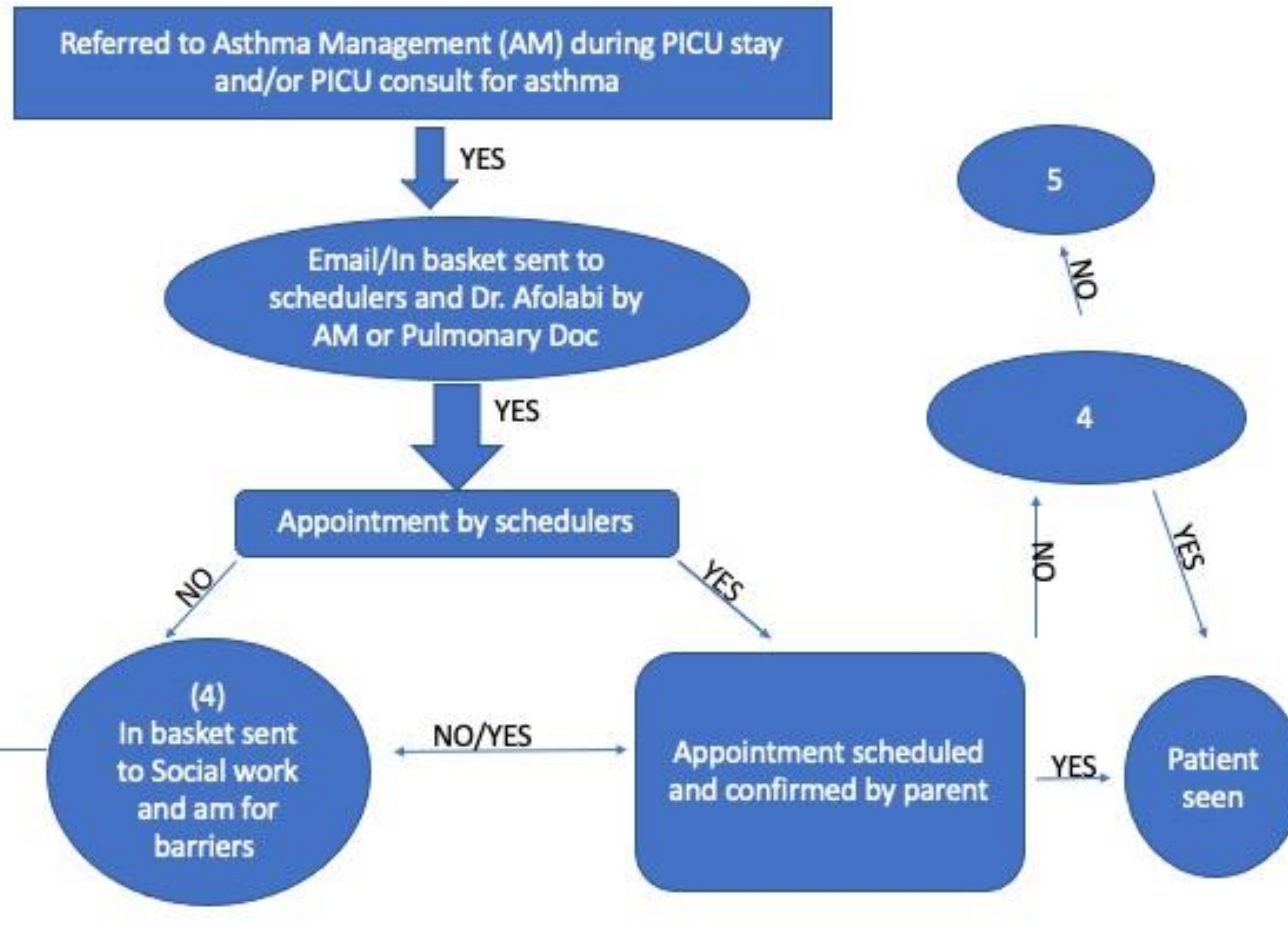


# Specific Aims

- Increase asthma specialist follow-up of children admitted to the PICU for status asthmaticus by 10% in the next 12 months.
- Increase available clinic space for these children by 4 clinic spots per week



# Process Map





# Application of What You Learned at LEAD

- Clear communication with stakeholders and finding common ground
- Leaning on my leadership style to gain stakeholder buy-in.
- Using coaching style language when approaching staff and providers when requesting resources.



# Proposed Budget

- 5% Time for scheduling, coordination and tracking
- 5-10% Clinic Time
- 5 % social work time to coordinate care
- 5-10% Asthma management coordinator time





# Innovation and Significance

- Providing resources and contact with patients prior to clinic visits including education and transportation management
- This would be the first pathway to improve follow up for high-risk severe persistent asthma in Children's Health Medical System
- This pathway can be expanded to other hospital and clinic settings.
- Small changes that can make a large impact throughout the state.



# References

- Expert Panel Report 4: Guidelines for the Diagnosis and Management of Asthma. [Bethesda, Md.]: U.S. Dept. of Health and Human Services, National Institutes of Health, National Heart, Lung, and Blood Institute, 2020
- Krishnan, J., Cloutier, M., Schatz. National asthma education and prevention program 2020 guideline update: Where do we go from here? *Am J Respir Crit Care Med.* 2021 Jan 15;203 (2):164-167 doi: 10.1164/rccm.202011-4236ED.