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The role of the asthma educator in pediatric practices

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The role of the asthma educator within a pediatric practice has been shown to enhance and improve patient outcomes. Data has shown exactly how much of a change occurs during a pediatric well child visit when there is the intervention of an education specialist. In the New York City database from the 379NYC Department of Health and Mental Hygiene, the percentage of pediatric patients hospitalized due to asthma exacerbations has declined from the high 80% to the lower 30% due to the introduction of an asthma educator providing extensive asthma education, teaching and reinforcement of all medications and devices during the well-child care visit. Additional data has shown a decrease in the number of school absences due to asthma, again upon the proactive intervention of an asthma educator within the pediatric practice. Before the year 2000, at Queens Hospital Center, studies have shown pre-asthma educator involvement lead to higher well-child visit hospital admissions, emergency department (ED) visits and missed days of school. Clearly, there was a need for more intervention. The NYC Department of Health and Mental Hygiene had started to recognize these high rates within their public hospitals and, therefore, established initiatives tailored to meet the needs of these patients and allow them to be more involved with their care. The NYC Asthma Initiative was presented to public hospital outpatient clinics with mandatory requirements at all well-child pediatric visits. Some of these requirements were: The introduction of a written asthma action plan at each visit; the completion of the medications administration form (MAF); the use of a chamber or spacer always with all prescribed inhalers, and; lastly, to have an asthma educator provide teaching and asthma education during the well-child visit. The asthma initiative along with the NYC Asthma Partnership (NYCAP) wanted to improve outcomes of pediatric asthmatic patients with the implementation of these mandatory requirements. Queens Hospital Center, in the year 2000, decided to implement an education specialist within their pediatric practice, in particular as an addition to their pediatric pulmonary clinic. The asthma educator would work with the provider, nurse and team to ensure a well-rounded educational experience for the asthmatic patient. Weekly visits with the introduction of an asthma educator during the well-child visit had started to show more improvements in declining hospitalization rates, ED visits for asthma and school absences. This data was evident over the years by the NYC Department of Health and Mental Hygiene, citywide, as well as, borough to borough. Patients now became more empowered and more connected with their condition, and knew they could always contact the asthma educator for any services they needed. There was also more compliance to keeping all their appointments and follow-up with their providers. Over the years, we can say that the impact of having an education specialist within a practice has shown great outcomes and has shown sustainability as well.

Biography

Bala Joshi has completed her BA from Queens College, 1987 and RRT in Respiratory Therapy from NYU School of Graduate Studies, 1994. Currently, she is working at Queens Hospital Center, USA. She is a Pediatric Health Educator for the last 16 years. She has been a member of many organizations and associations and has been a consistent team player within a pediatric practice.

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