

VERMONT ASTHMA PROGRAM STATUS – SEPTEMBER 2008

Asthma Program Goals

1. A comprehensive statewide surveillance system will monitor progress, support, evaluation and will identify populations with higher rates of hospitalization or other severity indicators
2. Exposure to environmental triggers will be reduced for people with asthma
3. Vermonters with asthma, their families and other caregivers will be engaged in appropriate asthma self-management
4. Vermonters will live in communities that support healthy lifestyles that enable them to prevent and manage chronic conditions
5. Health care providers will use the current National Asthma Education and Prevention Program (NAEPP) Diagnosis and Treatment Guidelines to properly diagnose, treat, and assist their patients in reducing symptoms and improving self-management
6. Health care systems will share information and adopt reimbursement strategies that lead to optimal asthma care

Asthma Program Objectives

	Baseline	Status	2012 Goal
Focus Area One: Patient Self Management			
1.1 Increase the percentage of Vermont adults with asthma who have written Vermont Asthma Action Plans	20.7 (2004)	22.3 (2006)	27.5
1.2 Increase the percentage of school age children with asthma who have written Vermont Asthma Action Plans	17 (2005-6)	21 (2007-8)	21
1.3 Increase the percentage of Vermont adults with asthma and co-occurring obesity who have written Vermont Asthma Action Plans	28 (2004-5)	*	35
1.4 Increase the number of Vermonters with asthma and a high school education or less that complete the Healthier Living Workshop	29 (7/2008)	40 (1/2009)	210
Focus Area Two: Community			
2.1 Pilot and evaluate a new educational intervention with pharmacists in two communities	-		2
2.2 Collaborate with ALA-VT and hospital-based respiratory therapists to implement the Better Breathers Program at six sites, facilitated by a Certified Asthma Educator	-		6
2.3 Twenty-four new schools will participate in the ENVISION Program	149 (2007-8)		173

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Asthma Program Objectives (continued)

	Baseline	Status	2012 Goal
2.4 The Department of Health will present a written proposal for developing a strategically aligned Healthy Homes partnership or initiative	-		-
2.5 Increase the proportion of smokers who believe that breathing smoke from other people's cigarettes is very harmful	49 (2006)	50 (2007)	55 (2008)
Focus Area Three: Provider Practice			
3.1 Ensure that all Vermont provider practices have access to NAEPP treatment guidelines for asthma management	-		-
3.2 VDH Asthma Program will strategically align with the Blueprint for Health initiative and other VDH chronic disease programs to address how practices can succeed in providing optimal treatment of patients and demonstrating utilization of provider knowledge and practice of the revised NAEPP guidelines	-		-
3.3 Increase the percentage of adults with asthma who receive a flu vaccination	36 (2005)	28 (2006)	60
Focus Area Four: Health Care System			
4.1 Increase communication among private and public insurers, including the Vermont Department of Corrections, about disease management and reimbursement			
4.2 Decrease the hospital discharge rate for adults over the age of 65 with a primary diagnosis of asthma (rate per 10,000)	14.3 (2005)	11.9 (2006)	13.0
4.3 Develop a reporting system to increase coordination among school nurses, parents and providers that is conducive to delivering best care of school age children	-		-
Focus Area Five – Rutland Area Pilot			
5.1 Reduce the hospitalization rate for adults in the Rutland Hospital Service Area with a primary diagnosis of asthma (rate per 10,000)	17.5 (2005)	13.2 (2006)	15.9
5.2 Identify and develop a plan with stakeholders in the Rutland area to determine practice patterns, demographics, environmental factors, etc. that may influence the rate of asthma hospitalizations	-		-
5.3 Implement and evaluate three pilots, one in each of three settings: school, community and workplace and evaluate the impact	-		-



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