

Rooming Process for Patients with Asthma

The following Pathway was developed, implemented, and refined by the American Lung Association in Minnesota. The pathway is intended to give other clinics a starting point for systems-change.

Goal: Standardize rooming protocol for patients with asthma

Chronic Care Model: Delivery system design, decision support

Snapshot

Clinic A:

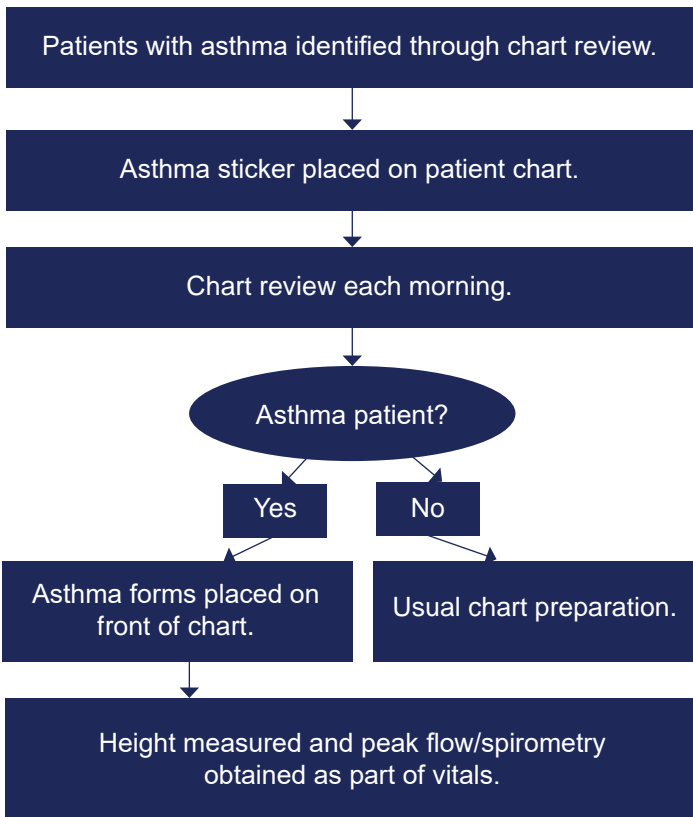
1. Medical assistants prep charts (place patient self-assessment survey and predicted peak flow rate table on chart)
2. Medical assistants measure height and peak flow as vital signs on all asthma patients

Clinic B:

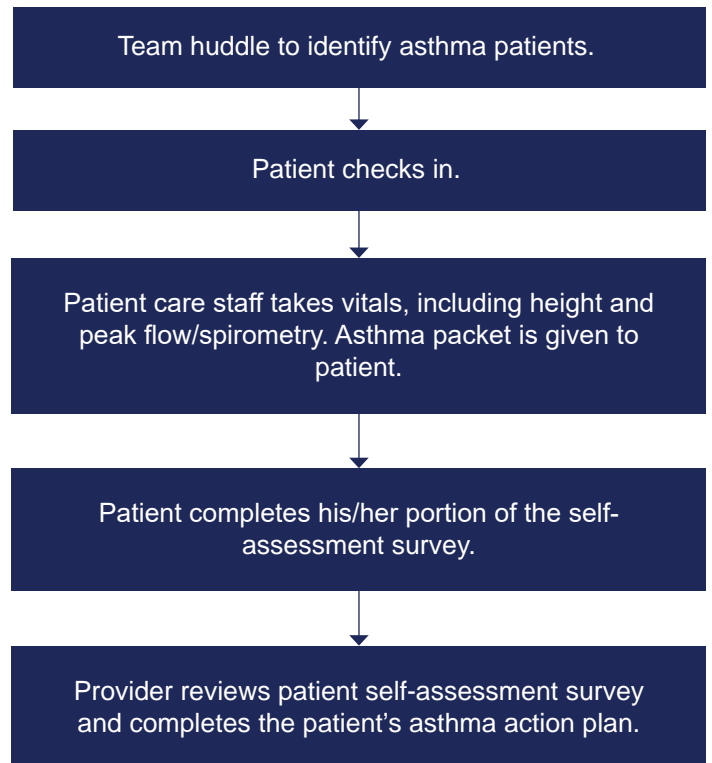
1. Team huddle to identify asthma patients on that day's schedule, immediately prior to clinic beginning
2. Patient care staff measures height, conducts peak flow monitoring, spirometry and gives patient the asthma packet (patient self-assessment survey, patient guidelines, and pre-completed asthma action plan)
3. Provider reviews the patient self-assessment survey and green zone on asthma action plan during visit

Flow Diagram

Clinic A



Clinic B



Implementation Details/Considerations

Clinic A: In order to determine which patients have asthma, they reviewed medical charts and identified the patients with asthma. Those charts were then marked with an asthma sticker on the outside of the chart. During intervention week one, the nurse manager reviewed charts with patient care staff each morning to find the asthma patients and placed the appropriate asthma forms on the chart. During week two, the patient care staff marked the asthma patients on their printed schedule. At the end of each day during week two, the nurse manager reviewed which patients had asthma (according to the marked printed schedule) and if that patient received and completed a patient self-assessment survey. A candy incentive was given to the patient care staff whose forms were complete. An in-service was conducted in week two for patient care staff about appropriate peak flow monitoring/spirometry. Beginning the third week, the expectation of the patient care staff was to place asthma forms on all asthma patients' charts, measure height of asthma patient, and conduct peak flow monitoring/spirometry when the patient with asthma was in exam room.