

Programs and Policy: Linking Asthma Outcomes to Policy and Building Support

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Our Background

- Respiratory Health Association is an Illinois Non-Profit founded in 1906
- Focus is on programs, research and advocacy to support healthy lungs and fight lung disease
- Asthma is a significant portion of our program of work

What We Do

- We have been heavily involved in delivery of asthma self-management education to school children in the Chicago metropolitan area
- We use Fight Asthma Now
 - An evidence-based age-appropriate program
 - More than 1300 children annually

What We Do (cont'd)

- Developed Asthma Management
 - A one-hour survey course
 - For teachers, caregivers, and parents of children with asthma
 - Course delivered to 2500+ annually
- Engage in asthma advocacy efforts
 - Local, state and federal level

Agenda for Today

- Definitions
- Using asthma outcomes to bring about policy change
- Case study: quick relief self-medication policy
- Constructing your coalition and building support for policy change

Definitions

- Asthma Outcomes
 - Any measurable, verifiable change in the knowledge or behavior of someone living with asthma or those in his/her environment (i.e. teacher)
- Policy Change
 - A change in a formal or informal practice at the local, state or federal level

A Cautionary Note: Not all “wins” in asthma require policy change

- Many types of asthma challenges exist
 - Need for improved access to medications
 - Access to healthcare providers
 - Self-management education, etc
- Today's focus
 - Challenges which could be impacted in a positive way by policy

Today's Mission

- Discuss how to use asthma outcomes (as we have defined them) to bring about Policy Change
- Change can happen at many levels
 - School
 - Local
 - State
 - Federal

Case Study: Quick Relief Self-Medication Policy

- Chicago Public Schools adopted an internal policy in 1998
 - Permitted school children with asthma to carry and self-administer quick relief inhalers
- Illinois Public Act 92 0402 passed in 2001
 - Made the Chicago Policy Statewide
 - Impacted all schools, public and private
 - Law included self-carry and self-administer
 - Parent and physician signatures required

Expansion of Public Act 92 0402

- 2010
 - Removal of medical providers signature on separate form to self-carry
- 2005
 - Addition to self-carry and administer at camp and recreational activities
- 2004
 - Expanded policy to include auto-injectable epinephrine pens

Implementation

- Policy does not equal implementation
- Careful monitoring of a policy needs to be completed after passage
- Careful monitoring of other policy
 - Local level
 - Federal level
- Data is a critical piece

Monitoring of Public Act 92 0402

- Surveyed 1300 Cook County/CPS Schools
 - Do your students have unrestricted access to their quick relief medications?
 - Respondents were RNs/Administrators
- Goals
 - Are the schools aware of the policy
 - Is policy being implemented correctly
 - Do students have unrestricted access and are they allowed to self-carry and administer



Results

- 2003
 - 20% return rate
 - 90% reported schools had unrestricted access to medications
- 2007
 - 25% return rate
 - 87% reported schools had unrestricted access to medications

Survey Comments Suggested Compliance Was Uneven

- Yes, they may go see the school nurse any time for medication
- Yes, it is kept locked in the nurse's office
- Yes, [but] only the older children are allowed to carry it
- Yes, it is locked in the school office
- Yes, with a doctor's note on file
- No, the medication is kept locked in the office

More Survey Comments

- Asthma medication is locked in school office – labeled with student's name
- No – Our medications are locked, but the children come to us & we watch them take it
- Yes, it is kept in the nurse's office unlocked
- Older students carry their medication. Younger students' meds are kept in the office
- Their medication is kept under lock and key per district policy



Implementation

- Almost 50% of the schools responding “yes” were actually violating the policy
- Clear misunderstanding in how to implement the current policy
- Clarification was needed
 - Medication policy sheet fact sheet was faxed to all schools
 - New education posters were developed

Respiratory Health Association's Pharmacy Project

- Goals of Project
 - Improve percent of children who self carry
 - What is the best delivery method of self medication form

RHAMC Pharmacy Project (cont'd)

- Forms were delivered through June-October (2009)
 - Pharmacies
 - Physicians' offices
 - Schools
- Data was collected at school level
 - September through November
 - 8 schools participated

The Schools that Participated in the RHAMC Pharmacy Project

- Schools
 - Enrollment of 3330 students
 - All African American population
 - With a 20% prevalence in community
 - 675 children in those schools should be diagnosed with asthma
 - By November
 - 40 children had turned in self-medication forms
 - 635 children possibly left unprotected

Medication Forms

	RN	MD	RX
Total Forms	36	3	1

Barriers Identified

- Current system is not working
- Too many barriers to self carry
 - Review the current system
 - Parent goes to MD gets script
 - Parent gets medication filled
 - Child goes to school with medication
 - May/may not get forms
 - Needs to go back to MD for signature
 - Needs to bring forms back to MD
 - Needs to return signed forms to school

The Policy Challenge: How Can We Reduce the Barriers?

- Opportunities to reduce barriers
 - Through policy
 - Eliminate MD signature form
 - Revise current self carry legislation
 - Does MD signature change anything?
 - Will it eliminate a barrier?

New Process

- Parent goes to MD gets prescription
- Parent gets medication filled
- Child goes to school with medication
- May/may not get forms
- Needs to return signed form to school

Some Legislative Questions From Quick Relief Self-Medication Case Study

- What worked
 - Having data to show that their needs to be change
 - Showing that the process is not working
 - Identifying the steps involved are too involved and a barrier
 - Patience

Case Study Questions?

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Constructing Your Coalition and Building Support for Policy Change

- Identify the problem you want to address/the policy you want to change
- Develop a strategy to achieve the policy change
- Identify key stakeholders and allies needed to build your coalition
- Identify allies and opponents within the target of your policy change
- Execute your policy strategy

Helpful Hint: Policy Change is a Dynamic Process

- Each of the elements in constructing your coalition and components and building support for policy change is subject to revision
- To secure a potential ally, you may need to modify one of your success strategies
- One of your success strategies may necessitate that you revise the policy change you are seeking
- Flexibility reigns (within reason)!

1. Identify the Target Problem/Proposed Policy Change

- The policy change you select should be:
 - Important to you and other stakeholders
 - Supported by program outcome or other evidence
 - Feasible for the implementer (if you succeed)
 - Achievable within a timeframe acceptable to you and your supporters
 - Achievable in an affordable manner

2. Develop Your Success Strategy

- Prepare a statement of your case for change
- Identify key allies and opponents
- Research
 - Learn from others in your community and around the US
- Draft a detailed success strategy
 - Strategy should take into consideration all of the above
- Include media and grass roots advocacy in your success strategy

Helpful Hint: Your Case for Change Should Include

- What are the most important facts supporting your proposed policy change?
- Why do those facts matter
 - Why does change matter to your stakeholders?
 - Why does it matter to decision-makers?
- What are the “extra” circumstances that support change
 - Is it consistent with a new local or national initiative?
 - Will there be economic savings?
 - Is there a chance to be first in the US?
- Think of your case for change as a selling document

Helpful Hint: Don't Develop Your Case for Change in a Vacuum

- Involve allies and stakeholders in the process
 - You receive
 - Important ideas and perspectives
 - You will build ownership in the proposed change



3. Identifying Key Stakeholders and Allies (Building Your Coalition)

- Identify all of the “Usual Suspects”
 - i.e. children with asthma, parents, school nurses, allergists, other medical professionals
- Think creatively about new stakeholders and allies
 - Organized labor, media allies, a new coalition
- Brainstorming really works
 - Especially in small groups
- Learn from others who have sought the same policy change

Helpful Hint: In building your coalition don't overlook existing coalitions

- Existing coalitions often have infrastructures
 - Allows you to mobilize support for your policy change
 - Often faster and at a lower costs than developing a new single purpose coalition

4. Identifying Allies Inside the Target of Your Policy Change

- If you are seeking to change school policy
 - Who are your allies within the school district?
 - Who are your opponents?
- If you are seeking to change a law
 - Who are your legislative allies?
 - Who are your opponents?

Helpful Hint: Be Realistic in Assessing Your Support and Opposition Within the Target

- Goal is to achieve policy change at a reasonable cost and within a reasonable time (for your stakeholders and allies)
- Assessing your support within the target is critical to the success of your policy effort

5. Execute Your Policy Strategy

- Plan a launch of your effort
 - Consider feasibility of media coverage?
 - Coordination with social networking and web promotion?
 - Other events?
- Communicate with coalition members, key stakeholders, and legislative allies
 - Not always the same communication!
- Measure your progress
 - Be honest with yourself and with your coalition about progress
 - Adjustments in goals and strategies, and fine-tuning the requested policy change
- Don't be discouraged—Rome wasn't built in a day!

Helpful Hint: Every Team Needs a Captain

- Identify a person (or persons) within your coalition to serve as the compass of the campaign
 - Are you on target?
 - Do you need to consider a mid-course alteration?
 - Is one of your coalition members failing to discharge his/her responsibilities?

Helpful Hint: Remember To Celebrate Your Successes and that Misery Loves Company

- As your policy change effort moves forward, the leaders in the effort should be aware of the morale of the supporters and key stakeholders.
- In victory or in defeat, it will be easier to mobilize your stakeholders for next year's efforts if you take good care of them this year.

Questions?

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