Evidence-Based Guidelines and Protocol Implementation in a Primary Care Clinic to Improve Chronic Asthma Care

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**Rationale**
- Asthma is a chronic inflammatory disease of airways resulting in airway narrowing, affecting 8.5% of Idahoans
- Asthma is under-diagnosed and under-treated, resulting in significant burden of disease.
- Achieving asthma control requires collaborative care between the patient and healthcare clinicians.

**Purpose/Aims**
Implementation of evidence-based guidelines and protocols for chronic asthma care in a rural primary care clinic system.

**Methods**
- Provided two education sessions on Global Initiative for Asthma (GINA) Guidelines, Asthma Control Test (ACT), and how to change the evidence-based plan of care as a result of patient ACT.
- One-on-one coaching sessions
- Materials provided to clinicians:
  - 2017 GINA Pocket Guide for Asthma Management and Prevention, Asthma Care Quick Reference
  - Respiratory Inhalers At-A-Glance
  - Centers for Disease Control and Prevention (CDC) Asthma Action Plan & Avoiding Asthma Triggers
- Data collection by:
  - Pre/post testing of clinicians with the UW Collecting evaluation data tool
  - NoMAD tool administration to clinicians mid and post implementation
  - Retrospective chart reviews

**Results**
- Chart audits & NoMAD tool responses indicate that clinicians continue the changed work flow
- Use of the ACT aided in communication between clinicians & patient
- Patients demonstrated an initial improved level of asthma symptom control based on ACT scores, but decreased air quality affected scores in August and September 2017.
- Consistent with literature

**Clinical Relevance**
- Results support expansion to the remaining five clinics in the system
- Achieving asthma control can result in improved patient experience of care, improved health of patients with asthma, and decreased health care costs