



Champion E-Correspondence

MAY 2011

This is an e-mail communication related to the American Academy of Pediatrics (AAP) "Medical Home Chapter Champions Program on Asthma." It is designed to provide AAP Medical Home Chapter Champions with resources as well as current clinical and other information. The Champion E-Correspondence is sent on a monthly basis. Feel free to share the Champion E-Correspondence with colleagues. Distribution information appears at the end of this newsletter.

Project Updates

- Congratulations to the following champions/chapters who have been awarded one of the [MHCCPA Visiting Professorship Programs](#): *Alabama, Kansas, Kentucky, New York Chapter 1, New York Chapter 2, Ohio, Oregon, Texas and Wisconsin.*
- There are a number of chapter champions who have still not claimed their complimentary AAP [Education in Quality Improvement for Pediatric Practice \(EQIPP\)](#) scholarship for the asthma OR medical home course. Please note that signing up does not require that you begin the course right away; however, the time frame for you to take advantage of this opportunity is limited. Please send an email to smontasir@aap.org to sign-up, today!

MEDICAL HOME



PROGRAM ON ASTHMA

Upcoming Events

- ◆ [Free CME Webinar: The Role of the Medical Home in Care of Children and Youth with Complex Chronic Conditions](#)
June 2, 2011
12 – 1 pm Central Time
- ◆ [AAP Future of Pediatrics Conference—Embracing Change: Improving the Health of ALL Children](#)
July 29 – 31, 2011
Chicago, IL

Who's Who?

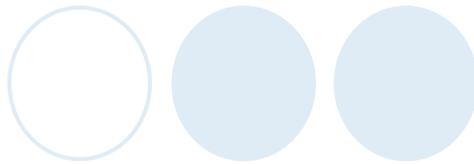
Until now, this section has featured a spotlight on each member of the MHCCPA Project Advisory Committee (PAC) so that you could get to know them better. This issue's spotlight is on the main staff for this project—myself and Michelle Esquivel, so that you can know a little bit more about us, as well. Going forward, this section will be featuring you! Look out for an email—coming from me in the near future—to solicit your help in contributing to this regular feature of the MHCCPA e-newsletter.

Suzi Montasir, MPH, serves as a Program Manager in the Division of Children with Special Needs where she manages the *Medical Home Chapter Champions Program on Asthma* as part of the Academy's Comprehensive Asthma Program. Suzi also provides technical assistance to pediatricians and other health professionals on how to better integrate medical home concepts in practice. Additionally, she provides guidance to pediatricians and others in states working on medical home implementation including, but not limited to, co-management issues and the role of the subspecialist in medical home as part of the National Center for Medical Home Implementation. Previously, Suzi worked as a project manager for the Illinois Chapter of the American Academy of Pediatrics where she provided support to an obesity prevention and management initiative. Ms Montasir received a Bachelor of Arts in Psychology and Cultural Anthropology from the University of Michigan and a Masters in Public Health, Community Health Sciences, from the University of Illinois, Chicago. In the past, Suzi has been involved as a coach and mentor for a local organization, *Girls in the Game*, to support wellness and physical activity among youth in Chicago. Suzi loves to be active and spends much of her time exploring Chicago with friends and planning her next trip, abroad.

Michelle Esquivel, MPH currently serves as the director of the MCHB HRSA funded National Center for Medical Home Implementation (NCMHI) as well as director of the American Academy of Pediatrics Division of Children with Special Health Care Needs. In this capacity, Michelle provides oversight and direction to the NCMHI and oversees all of the other federal and private grant activities in the division. She is integrally involved in the development, oversight and management of Academy-based activities that promote the medical home approach to care for all children and youth. Michelle has spent the majority of her career developing, planning, coordinating and implementing major health care programs and national, state and local educational conferences and training programs.

Michelle rejoined the national AAP after a 10 year hiatus; during her time away from the national AAP, she served as the associate executive director of the Illinois Chapter of the American Academy of Pediatrics (ICAAP) for more than 4 years. She was an ICAAP employee from 2002-2009 and during this time she oversaw projects and activities related to childhood asthma, neonatal-perinatal medicine; childhood and adolescent immunization; perinatal HIV; overweight and obesity in children; school health; residency programming; genetics, and early hearing detection and intervention. Michelle served as the project leader for ICAAP involvement in the Merck Childhood Asthma Network (MCAN) Chicago Asthma Action Plan: Addressing Asthma in Englewood since the inception of the program. Michelle maintained her contact with the national AAP during her time away via involvement with various contracts and special projects. An interesting tidbit—Michelle started her work with the AAP in 1987 as a student intern in the Department of Communications!

In her non-AAP time, Michelle enjoys spending time with her two daughters—who are 8 and 12—and her mother and 5 siblings who all reside in the Chicagoland area. Michelle loves to travel and is looking forward to her next trip—a family vacation in Washington, DC this summer!



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What's What?

You may recall that the MHCCPA constitutes Phase II of the Academy's Comprehensive Asthma Program (CAP). The first phase of the CAP—the Chapter Quality Network (CQN) Asthma Pilot Program—was implemented through the AAP Chapter Alliance for Quality Improvement (CAQI) in 2009/2010. This project was piloted through the establishment of AAP chapter-led learning communities over the course of 18 months with the following AAP chapters selected to participate—Alabama, Maine, Ohio and Oregon. The CQN pilot was featured in the March 2011 issue of *Heath Affairs* – click [here](#) to access the article.

The Chapter Quality Network phase 2 (CQN2) asthma project works at the practice, state and national levels to build a network of AAP chapters, enhancing their ability to lead a quality improvement collaborative to achieve measurable improvements in the health outcomes of children. Phase 2 of the asthma collaborative launched in March 2011 with a focus on moving toward full population data, building payer engagement, and improving parent involvement. The Academy is excited about the opportunity to spread to additional practices in Ohio and Alabama through the state chapters as well as an Ohio physician's hospital organization, Partners for Kids.

In CQN2, growth within the Alabama chapter is supported by a partnership with the University of Alabama-Birmingham, while the Ohio chapter has partnered with the CareSource Foundation (a Medicaid managed care plan). These partnerships further demonstrate the interest of other parties dedicated to improving children's asthma care.

Practice recruitment for CQN2 is slated for late June 2011, and data collection on 14 measures begins in September 2011. If you would like more information on CQN2, contact Jessica Zar at jzar@aap.org.

Reports and Resources

In the News...

- o [Research Suggests that Asthma Drugs May Be an Alternative to Inhalers](#)
- o [Customization Key to Successful Pediatric EMR Systems](#)
- o [Parental Beliefs Affect Flu Immunization of Children with Asthma](#)

Pediatric Asthma Resources from the National Environmental Education Foundation (NEEF)

The [NEEF Pediatric Asthma Initiative](#) works with pediatric asthma faculty champions to educate the health care community about environmental management through training and educational resources. [Environmental Management of Pediatric Asthma: Guidelines for Health Care Providers](#) was developed under the leadership of this initiative's steering committee and is supported by the AAP. This peer-reviewed document includes competencies for environmental management of asthma, an environmental history form, and environmental intervention guidelines, which are built on best current practices and scientific literature. They are founded upon NAEPP guidelines and are intended to be used by health care providers in conjunction with its clinical and pharmacological components, as part of a child's comprehensive asthma management plan. Visit the NEEF Pediatric Asthma Initiative [Web site](#) for more clinical resources, such as the [Diagnosis and Management of Asthma Tool Card for Health Care Providers](#). This pocket card can be [downloaded directly](#) from the Web site; laminated cards can also be obtained from NEEF.

New Pediatrics Study—Prescribing Antibiotics for Ambulatory Asthma Visits

When children visit their primary care doctor or emergency department for asthma treatment, national guidelines do not recommend antibiotics as a remedy, yet nearly 1 million inappropriate prescriptions for antibiotics are issued annually in the United States at asthma visits. The June 2011 issue of *Pediatrics* ([published online](#) on May 23) includes the study, [Antibiotic Prescribing During Pediatric Ambulatory Care Visits for Asthma](#), in which authors reviewed data from the National Ambulatory Medical Care Surveys and National Hospital Ambulatory Medical Care Survey. Emergency department and office visits made by children under 18 were assessed to determine the frequency of antibiotic prescriptions. From 1998 to 2007, an estimated 60.4 million asthma visits occurred. International Classification of Diseases (ICD) codes were used to evaluate coexisting conditions that warrant the use of antibiotics. Results indicate that antibiotics were prescribed at nearly 1 in 6 pediatric ambulatory care visits for asthma when the need for antibiotics was not justified. The co-prescribing of systemic corticosteroids was associated with an increased likelihood of antibiotic prescription suggesting that asthma symptom severity may influence the decision to prescribe antibiotics. In contrast, at visits where asthma education was provided by the treating physician, antibiotics were less likely to be prescribed. Given that inappropriate antibiotic prescribing can lead to drug-resistant bacterial infections, patient education may be one way to reduce unnecessary antibiotic prescribing.

Agency for Healthcare Research and Quality (AHRQ) and the Ad Council Release Conoce las Preguntas (Know the Questions) in an Effort to Address Health Disparities

The national public service advertising campaign, which features television, radio, print, and Web ads, offers tips to help Hispanics prepare for medical appointments by thinking ahead of time about questions to ask their doctors during medical appointments. The PSAs direct audiences to visit [AHRQ's Web site](#) to find tips and other important health information in Spanish. The campaign supports the HHS Action Plan to Reduce Racial and Ethnic Health Disparities, the Department's first-ever strategic action plan to reduce health disparities among racial and ethnic minorities in the United States. AHRQ's recently published [2010 National Healthcare Disparities Report](#) found that, compared with whites, the proportion of Hispanics who report having poor communication with their health providers is widening and the percentage who regularly get important screening tests to check for diabetes or cancer is not improving.