Implementation of the National Asthma Guidelines in a Residential Pediatric Clinic

Date: July 13, 2017
Time: 10:30 a.m. to 12:30 p.m.
Place: 102 Seton Hall

Abstract
Purpose: Foster care children admitted to residential facilities are a unique and vulnerable group, many presenting with undiagnosed or poorly managed asthma. The alarming rate of residents admitted to a particular residential primary care clinic with a diagnosis of asthma led to the project question: “Based on record reviews, does staff education about the importance of utilizing the national guidelines for asthma education influence the implementation of such guidelines in a residential pediatric clinic?” The purpose of this quality improvement project was to implement a systematic process to influence practice change. The project was conducted over a period of 4 weeks.

Design: The project was a single-group pretest-posttest design. The medical records were examined prior and post National Asthma Guidelines, Expert Panel Report-3 (EPR-3, 2007) education to determine whether guidelines had been implemented. A convenience sample consisted of male and female residents, 12-17 years of age, admitted to the clinic with a diagnosis of asthma or any resident having experienced any asthma symptoms. Twenty-nine children’s records (n=29) were studied.

Findings: The composite review of documented asthma guidelines was significantly higher post-intervention ($M=3.96$, $SD=1.81$) than pre-intervention ($M=1.34$, $SD=1.54$), $t(28)=7.99$, $p<0.001$ for all measured variables. A large effect size was noted.

Conclusion: Implementing national asthma guidelines encouraged best-practice for the residential facility and improved asthma care for a transient high-risk population. The literature review demonstrated a lack of data regarding pediatric primary care clinics in residential facilities.

Implications: This study provided important information about implementing evidence-based practice. Larger studies are needed in the future.

Defense of Dissertation Committee
Roxanne Vandermause, Ph.D. (Chair)
Laura L. Kuensting, DNP, APRN, PCNS-BC, CPNP, CPEN
Nancy Magnuson, DNS, FNP