Open Airways for Schools in Vermont

Vermont Asthma Program Achievements for the 2014-2019 Grant Cycle



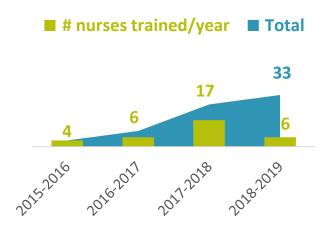
Open Airways for Schools (OAS)

- Evidence-based asthma selfmanagement curriculum from the American Lung Association (ALA).
- Empowers youth to control their asthma by teaching warning signs of asthma, identification of asthma triggers, and proper medication use.
- When a child completes OAS, they are healthier, absent less from school, and participate in more physical activity.
- OAS facilitator training is available to healthcare providers, school personnel, & other advocates.

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33 Nurses trained in OAS

 33 VT school nurses completed the training from the ALA to instruct OAS.



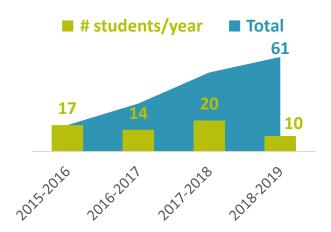
Impact of OAS in VT

- 14% of VT school nurses from 23 school supervisory unions were trained in enhanced asthma management and OAS certified.
- 100% of enrolled students completed OAS.
- VT students completing OAS:
 - ✓ Increased their use of longterm control medication,
 - Used a spacer with inhaler,
 - ✓ Increased proper inhaler technique,
 - Experienced less uncontrolled asthma.



61 students completed OAS

- 11 Vermont schools offered OAS.
- 100% of the students enrolled completed the OAS curriculum.



Source: Open Airways participant forms, 2015-2019

December 2019

Learn more at healthvermont.gov



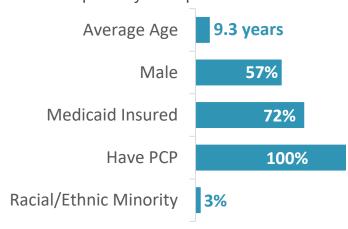


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Student demographics

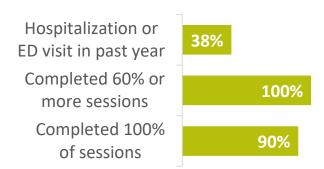
- Student enrolled in OAS were 6 14 years old.
- Most were male, Medicaid insured, and had a primary care provider.



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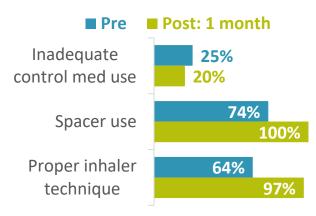
OAS Participant profile

- 38% of students had an ED/Urgent care visit or hospitalization for asthma in the year prior to OAS.
- All enrolled students completed at least 60% of the sessions and 9 in 10 completed all sessions.



Medication use

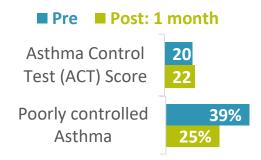
 Students completing OAS showed a 20% relative increase in long-term control medication use, universal spacer use, and 52% increase in proper inhaler technique.





Asthma control

- Average Asthma Control Test (ACT) score increased from 20 to 22.
- Proportion of students with poorly controlled asthma decreased from 39% to 25%.
- 69% of students achieved improved asthma control (33/48).



Sources: Open Airways Participant forms, 2015-2019
December 2019
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OAS Curriculum

- Delivered by OAS certified facilitator.
- Developed for youth ages 8 to 11.
- Taught in five or six 30-minute smallgroup sessions that include:
 - ✓ Caring for your lungs,
 - ✓ Identifying and decreasing exposure to asthma triggers,
 - Recognizing and managing asthma symptoms,
 - Understanding how to properly use asthma medications,
 - Getting exercise and doing well at school.

Tips for Conducting OAS ¹

- Identify students with uncontrolled asthma.
- Form cohorts of students from a single grade to aid in scheduling.
- Begin early in the semester to allow time for curriculum and 1-month follow up.
- Seek an asthma champion to assist in delivering OAS.



To learn more...

Vermont Asthma Program

www.healthvermont.gov/wellness/asthma

Vermont Asthma Data

https://www.healthvermont.gov/healthstatistics-vital-records/surveillance-reporting-topic/asthma

Open Airways for Schools

www.lung.org/lung-health-and-diseases/lung-disease-lookup/asthma/asthma-education-advocacy/open-airways-for-schools

Data Notes

- ¹ VT Open Airways for School: Pilot Initiative Evaluation Summary Report 9/2016.
- OAS was not implemented in Year 1 of CDC grant.
- # of sessions attended was not available in year
 2, and not available for one school in year
- Percentages calculated as the # / # students with data for given measure (missing data dropped).
- Relative percent change = (baseline final)/baseline * 100.
- Collection of all data points for each student is needed to fully assess the impact of OAS in VT.

Sources: Open Airways Participant forms, 2015-2019

December 2019

Learn more at healthvermont.gov

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OAS Performance Measure Summary

CDC Performance Measures	Y2	Y3	Y4	Y5	Total
# of students enrolled	17	14	20	10	61
# w/ ED/IP/UC in past year	n/a	7	8	1	16
# w/ uncontrolled asthma at enrollment	4	8	6	4	22
% w/ uncontrolled asthma at enrollment*	25%	89%	30%	40%	40%
# completing 60% of sessions	n/a	9*	20	10	39
# completing 100% of sessions	n/a	9*	16	10	35
# completing 60% of sessions who demonstrate skills/knowledge	n/a	7	18	8	33
# completing 100% of sessions who demonstrate skills/knowledge	n/a	7	15	8	30
# completing 60% of sessions w/o PCP who received referral	n/a	n/a	n/a	O [‡]	O [‡]
# completing 100% of sessions w/o PCP who received referral	n/a	n/a	n/a	O [‡]	O [‡]
# completing 60% of sessions w/ uncontrolled asthma @ enrollment	n/a	8	6	4	18
# completing 100% of sessions w/ uncontrolled asthma @ enrollment	n/a	8	5	4	17
# comp. 60% of sessions & w/ uncontrolled Asthma & using LT control Med <7 d/wk @ enrollment	n/a	2	3	3	8
# completing 100% of sessions & w/ uncontrolled Asthma using & using LT control Med <7 d/wk @ enrollment	n/a	2	2	3	7
# completing 60% of sessions & w/ uncontrolled Asthma & using LT control Med @ enrollment, who 个 med use	n/a	0	2	0	2
# completing 100% of sessions & w/ uncontrolled Asthma & using LT control Med @ enrollment, who 个 med use	n/a	0	2	0	2
# completing 60% of sessions w/ uncontrolled asthma @ enrollment, & controlled at 1 m follow up	n/a	3	4	3	10
# completing 100% of sessions w/ uncontrolled asthma @ enrollment, & controlled at 1 m follow up	n/a	3	4	3	10
# completing 60% of sessions who had ED/IP/UC in past year	n/a	5	8	1	14
7 performance measures were n/a due to no 12 m follow up	n/a	n/a	n/a	n/a	n/a

n/a: data not collected/available; * Those with missing data excluded from calculation; * All students had primary care provider at intake. The Vermont Asthma Program began promotion of OAS in Year 2 of CDC grant.