

Impact of Asthma in Rural Northern California

- Daily preventive treatment can prevent symptoms and attacks and enable individuals who have asthma to lead active lives.
- One-quarter of low-income children and adults in rural Northern California have asthma. And one in five patients served by community clinics and health centers in the region has asthma.⁴⁴
- Environmental and socioeconomic factors contribute to the incidence of asthma in rural Northern California. Factors such as poor air quality, exposure to second hand smoke, and poor housing quality may increase risk for asthma.
- Rural counties in Northern California and the Central Valley have the highest adolescent asthma rates in the state.⁴⁵

How Health Centers Provide the Necessary Care

Clinical Interventions

- Identify the type of asthma and associated triggers. Develop written asthma action plans.
- Conduct regular asthma medication evaluation and collect patient feedback.
- Offer provider education on the identification and management of asthma.
- Educate patients on using peak flow meters and following their asthma action plan.

Community Interventions

- At community health fairs offer free pulmonary screenings and education on environmental asthma triggers.
- Display and distribute asthma educational brochures and free environmentally safe products at community centers or other popular gathering places in the community. Offer home environmental assessments and trigger reduction assessments for patients.

⁴⁴ California Health Interview Survey. CHIS 2009 Adult Public Use File. Los Angeles, CA: UCLA Center for Health Policy Research, May 2013.

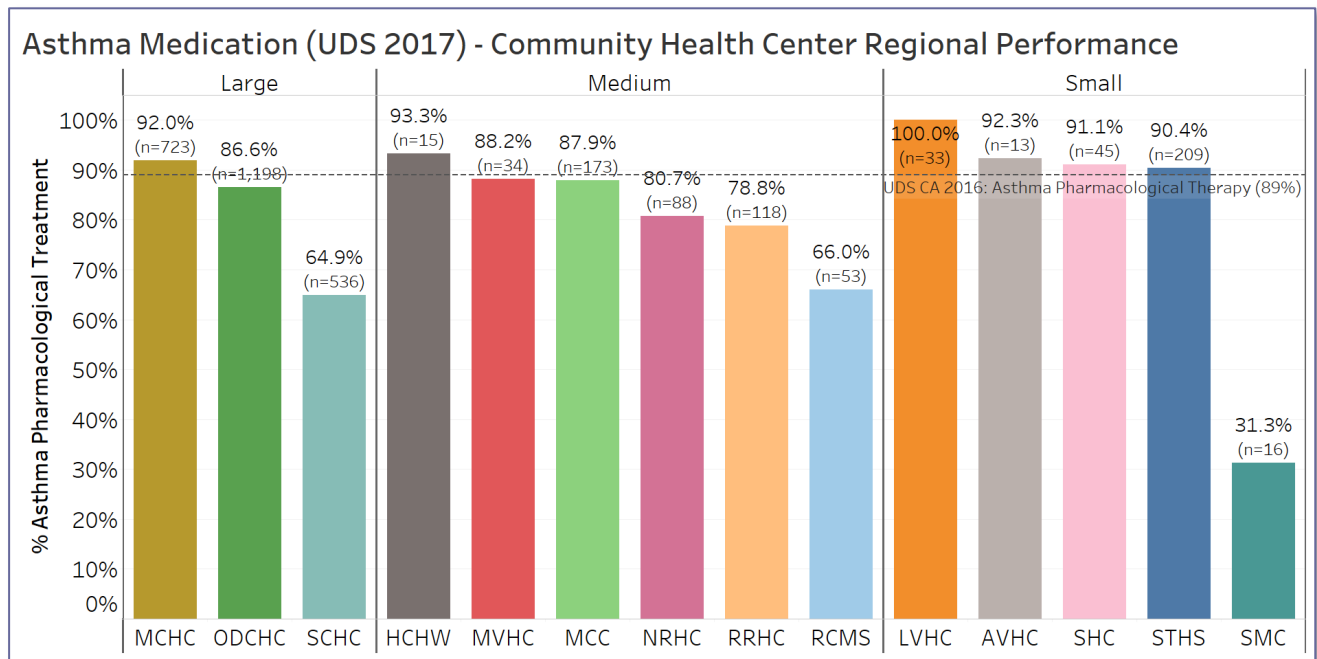
⁴⁵ Cpitman, J, Tyner T (2011). The Impacts of Short-term Changes in Air Quality on Emergency Room and Hospital Use in San Joaquin Valley. San Joaquin Valley Air Pollution Control District. Fresno, CA.

Use of Appropriate Medications for Asthma

Rural Northern California Health Center Data

Key Points

- There has been an increase in wildfires in the region in the past few years. This contributes to the incidence and severity of asthma in rural Northern California.
- Wood-burning stoves are used commonly in rural and frontier areas, which may contribute to asthma symptoms.
- Patient medical records often do not reflect a diagnosis of persistent asthma due to issues related to medical coding. This may lead to variation in the data as it often is collected through chart review and provider inquiry.



Measure Definition (UDS 2017)

The Percentage of patients aged 5 through 40 with a diagnosis of mild, moderate, or severe persistent asthma who received or were prescribed accepted pharmacologic therapy.

- Accepted pharmacologic therapy may include prescription for an inhaled corticosteroid or prescription for an alternative pharmacological agent (i.e., Cromolyn)

National Quality Goals and Benchmarks

California UDS Average (CA UDS Average 2016): The average performance among health centers in California for 2016 was 89.0%.