Title of Intervention: Hospital Asthma Intervention Program for African American Women

Intervention Strategies: Individual Education, Supportive Relationships, Provider Education

Purpose of the Intervention: To decrease rates of readmissions within six months of hospital discharge, to reduce cost and to improve health-related quality of life

Population: Adult African American women with asthma

Setting: Barnes Jewish Hospital in St. Louis MO; health care facility-based

Partners: Not mentioned

Intervention Description:
- Individual Education: While in the hospital, participants completed a daily "asthma care" flow sheet. Participants received individual asthma education tailored to their education, motivation and cultural beliefs. Participants established an individualized asthma self-management plan.
- Supportive Relationships: Participants received support from nurses and were screened for professional counseling. Participants and health care providers consulted with social service professionals to facilitate discharge planning. Participants received outpatient follow-up through telephone contact, home visits and follow-up appointments with the primary physician, as necessary.
- Provider Education: After reviewing participant charts, nurses advised the primary physician regarding potential simplification or consolidation of current regimen.

Theory: Not mentioned

Resources Required:
- Staff/Volunteers: Nurses
- Training: Not mentioned
- Technology: Not mentioned
- Space: Space in hospital for activities
- Budget: Not mentioned
- Intervention: Asthma care flow sheet, educational materials
- Evaluation: Questionnaire, interview protocol

Evaluation:
- Design: Randomized controlled trial
- Methods and Measures:
  - An Asthma Quality of Life questionnaire was used.
  - Nurse interviews gathered additional information.

Outcomes:
- Short Term Impact: Not measured
- Long Term Impact: There was a significant reduction in subsequent readmissions, lost work/school days and direct and indirect healthcare costs. There was not a significant reduction in ER or doctor's visits.

Maintenance: Not mentioned

Lessons Learned: A brief intervention program focusing on high healthcare users with asthma can result in improved asthma control and reduced hospital use with substantial cost savings.

Citation(s):