Governance of paediatric asthma/preschool wheeze in Hillingdon

All organisations/services (Box 1) within Hillingdon borough must have a named lead responsible and accountable for asthma (1)

Quarterly strategic meetings (Box 2) with named leads to plan and deliver asthma service (2)

CYP and families are actively involved in reviewing local services provision and giving feedback (9)

This pathway is underpinned by the London Asthma Standards for Children and Young People published June 2015 to which all references relate.

https://www.myhealth.london.nhs.uk/system/files/London%20asthma%20standards.pdf
New presentation of possible asthma/ preschool wheeze to primary care (Non-acute)

Initial assessment and diagnosis according to BTS and NICE guidance [14]
Use EMIS Template [4]
Children should be seen in an ‘Asthma friendly clinic’ (Box 1)

Regular Structured asthma review (Box 2)
Every 3 months according to clinical need

Signpost to relevant lifestyle advice
Stop smoking advice (Box 3)
Obesity management advice (Box 4)
Useful websites (Box 5)

- Child not improving
- Diagnostic uncertainty
- Not controlled on step 3 BTS
- Parental concern
- Input from paediatric asthma nurse would be beneficial for family

Refer to Hillingdon Paediatric Respiratory Team with Spirometry and allergy skin testing as required.
Fax ....
Email....

Referral triaged to hospital or community asthma clinic
If Difficult Asthma / Diagnostic uncertainty
Refer to Tertiary Services [29]

Box 1: Asthma friendly clinic
- Named lead responsible & accountable for asthma (1)
- At least one practice nurse trained in asthma and holds an asthma diploma [39]
- Trained staff with appropriate training and ongoing education in paediatric asthma at least every three years [39]
- 20-30 minute clinic slots for assessment and management of each patient [5]
- For each consultation access to
  - Asthma control test paperwork [15]
  - Selection of training devices
  - Peak flow meters and diaries
  - Information leaflets
  - Signposting to supporting websites
  - Stop smoking advice/ healthy eating advice

Box 2: Structured asthma review
- Assessment of wheeze triggers [6]
- Assessment of adherence [28]
- Assessment of inhaler technique [13] [28]
- Assessment of Control/ Asthma control test [15] [28]
- Peak flow monitoring (if applicable)
- Patient/parent understanding of condition, [28]
- Screened for comorbidities [6]
- Personal written management plan [27]
- Growth monitoring

Box 3: Stop smoking advice [7]
- Hillingdon.gov.uk/stopsmoking
- Call 0800 169 7541 for advice
- Drop in community clinics/pharmacy clinics
- Information leaflets to parents.
- All health professionals to undertake the National Centre for Smoking Cessation Training of Very Brief Advice

Box 4: Obesity management
- Health visitors
- Parents can self referral to Mend/Fit Teens club
- Referral to hospital dieticians

Box 5: Useful websites [7]
- http://www.itchysneezywheezy.co.uk/
- https://www.asthma.org.uk/
Acute asthma presenting in school

Child with acute asthma or pre-school wheeze
Age 1-15yrs, in school

Trained staff manages according to school asthma policy & Asthma Attack Guidelines / Poster

Improves
- Parent to collect child from school if required
  - 10 puffs of Salbutamol
- Welfare officer/school nurse instruct parents to make appointment with GP
- Parents given letter for GP follow up
- Follow School Asthma Surveillance pathway

No improvement
- Call 999 & inform parents
Acute asthma presenting in primary care (GP practice)

Child with acute asthma or pre-school wheeze
Age 1-15yrs , attends GP practice

Manage according to BTS and NICE guidance
Use EMIS Template (4)

 Improves and safe to discharge home

Structured discharge review (Box 1) before discharge home to identify modifiable risk factors for repeat attack
Use EMIS Template (4)

Arrange local asthma review within 6 weeks to check asthma under control

Consider referral to Hillingdon Paediatric Asthma Team (See box 2)

No improvement
Refer to Paediatric A&E/ 999

Box 1: Structured review before discharge
• Assessment of wheeze triggers [6]
• Assessment of control/ asthma control test [15] [28]
• Review inhaler technique [13] [28]
• Review adherence [28]
• Step up treatment using BTS guideline
• Provide asthma self-management education [28]
• Provide a written asthma action plan [27]
• Advise on home peak flow monitoring (Age >6 years)

Box 2: Refer patients to Hillingdon Paediatric Asthma Team if:
• Unable to arrange GP follow up in 2 working days
• 3rd acute asthma presentation within last 12 months
• School absence due to asthma/wheeze
• Symptomatic between acute episodes
• Not controlled on BTS step 3
• Known asthmatic and never had a GP review
• Life threatening asthma/ difficult asthma/ psychosocial risk factors/ other specific concern
• Fax 01895 279901/ Email
Acute asthma presenting to the Urgent Care Centre

Child with acute asthma or pre-school wheeze
Age 1-15yrs, attends GP practice

Manage according to BTS and NICE guidance
Use EMIS Template (4)

Improves and safe to discharge home

No improvement
Refer to Paediatric A&E

Structured discharge review (Box 1) before discharge home to identify modifiable risk factors for repeat attack
Use EMIS Template (4)

Patient Champion/Health connector arranges primary care follow up within 2 working days (16)

Consider referral to Hillingdon Paediatric Asthma Team (See box 2)

Box 1: Structured review before discharge
- Assessment of wheeze triggers (6)
- Assessment of control/asthma control test (15) (28)
- Review inhaler technique (13) (28)
- Review adherence (28)
- Step up treatment using BTS guideline
- Provide asthma self-management education (28)
- Provide a written asthma action plan (27)
- Advise on home peak flow monitoring (Age >6 years)

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- Not controlled on BTS step 3
- Known asthmatic and never had a GP review
- Life threatening asthma/difficult asthma/psychosocial risk factors/other specific concern
- Fax 01895 279901/ Email
Acute asthma presenting to the Hospital

Child with acute asthma or pre-school wheeze
Age 1-15yrs, attends paediatric A+E

Manage according to Hillingdon Hospital acute asthma guideline

Improves and safe to discharge home from A+E/POU

Structured asthma review before discharge (Box 1)
To identify modifiable risk factors for repeat attack
Use Hospital guideline (In Box)

No improvement
Admit to children’s ward

Hillingdon Paediatric Respiratory Team review before discharge (Box 2)
HPAT available Mon-Fri. Patients not seen will have EPROS reviewed and be followed up as required

Consider referral to Hillingdon Paediatric Asthma Team (See box 2)

Advise parent to book Primary care follow up within 2 working days

Box 1: Structured review before discharge
- Assessment of wheeze triggers [6]
- Assessment of control/asthma control test [15] [28]
- Review inhaler technique [13] [28]
- Review adherence [28]
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- Life threatening asthma/ difficult asthma/ psychosocial risk factors/ other specific concern
- Fax 01895 279901/ Email
Asthma Friendly School

- Named Asthma Champion – responsible for asthma in school
- Register of all known asthmatics
- Management plan for known asthmatics
- Asthma Champion links with community Asthma services & attends Annual Asthma Workshop in Hillingdon
- Clear asthma policy
- Accessible inhalers
- Annual training for staff
- Display of emergency plan
- Emergency inhalers
- Annual asthma audit

Child with diagnosed asthma or wheeze in school

Staff member has concern of:
- Medication use
- School absence
- Participation in curriculum
- Other

Discuss concerns with Asthma Champion

Asthma champion contacts parents and provides letter recommending asthma review at GP practice be arranged

Asthma training
- All welfare officers/school nurses/Asthma Champions to attend asthma workshop annually (mandatory – held twice yearly by specialist team)
- At least one person in every school is trained in managing asthma (i.e. holds a recognised certificate of competence e.g. asthma diploma) – COULD THIS BE ALISONS WORKSHOP CERTIFICATE? – ASTHMA DIPLOMA NOT AVAILABLE FOR WELFARE OFFICERS
- School nurses with Asthma Diploma to provide asthma training to entire school (30 minute session focusing on key messages)
- School nurses with an Asthma Diploma to run Asthma education sessions (every term) supporting peers, parental support, access to secondary schools, focus groups. (include all students)

Asthma Champion

- Named lead responsible & accountable for asthma
- Delivers London’s Ambitions for Asthma including: proactive, accessible care & co-ordinated care
- Attends asthma training workshop annually

Respiratory specialist nurse arranges appropriate review and follow up

Concerns resolve

Asthma Champion discusses with Paediatric Respiratory Team

Concerns resolve

Continues to have school asthma symptoms

Staff member has concern of:
- Medication use
- School absence
- Participation in curriculum
- Other

Discuss concerns with Asthma Champion

Asthma champion contacts parents and provides letter recommending asthma review at GP practice be arranged

Asthma Champion

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Respiratory specialist nurse arranges appropriate review and follow up

Concerns resolve

Asthma Champion discusses with Paediatric Respiratory Team

Concerns resolve

Continues to have school asthma symptoms
Community paediatric asthma clinic pathway

**Referrals (26)**
- 2 working day primary care review following an acute asthma episode
- GP/ HV/ welfare officer/ school nurse/practice nurse referrals
- Hospital inpatient follow ups
- A&E or UCC referrals

**Training**
- Act as hub for training all Hillingdon professionals in Asthma management

**Used as a support network between schools/GPs/HV**

- **Options after first review**
  - Discharge back to GP practice once asthma under control
  - Refer to Hospital clinic
  - Follow up in clinic if GP practice not able to provide asthma review service in accordance with London Asthma Standards

**Other resources:**
**Stop smoking**
- Signpost to Hillingdon.gov.uk/stopsmoking
- Parents can call 0800 169 7541 for advice
- Can attend drop in community clinics/pharmacy clinics based around Hillingdon borough.
- Provide information leaflets to parents.

**Obesity management**
- Signpost for self referral to Mend/Fit Teens club – 10 sessions
- Referral to hospital dieticians

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**Referrals**
- If unable to see GP within 2 working days post an acute episode.
- If 3rd presentation in 12 months to A&E/UCC
- 2nd hospital admission in last 12 months
- Diagnostic uncertainty
- Not controlled on step 3 BTS
- Parental concern
- School absence due to asthma/wheeze
- Participation in curriculum affected by asthma/wheeze
- Symptomatic between acute episodes
- Life threatening attack
- Known asthmatic, never had review at GP
- Difficult asthma
- Other specific concern

**Refer using community clinic referral form/ letter/ checklist**
**EMIS TEMPLATE**

**Referrals triaged by Paediatric Respiratory Team**

**Child will be reviewed in one of the weekly paediatric community clinics in Hillingdon borough (depending on postcode):**
- Hayes
- Yiewsley
- North of the borough?