



CAP REFERRAL FORM

Please fax Referral Form to (03) 9345-6231

Client details /	<u>Bradma label</u>	Date:
Name:		
Address:		
Phone No:	or	
DOB:	Sex: Male	Female
Contact Details	Consent to Contact ☐ Yes	□No
Name of contact pe	erson/ parent:	Relationship to child:
Phone no:	Mobile	9:
Interpreter required	? Yes No Langua	age
Referring Healtl	n Professional	
Name:		
Address:		
Phone No:		
Client history/m	nedication/triggers:	
☐ Visit to Emerge	ncy for asthma within last 12me	onths
Reliever Medica	ation:	
Туре:	Dose:	Frequency of use:
☐ Preventer medi	cation: Type:	Dose:
Additional Inform	ation (eg. pHx, social issues, o	educational needs, asthma severity)
*** Priority can be give	en to high risk cases. Please provide	comments above to support why this patient
may need more urgent	attention.	

^{*} Please attach a Written Asthma Action Plan if available*

What is CAP?

The Community Asthma Program (CAP) is a Hospital Admission Risk Program (HARP) funded by DHS. CAP provides FREE asthma education, support and management for young people (0-18years) and their family.

Evidence and research suggests that young people in this program have better health outcomes including:

Decrease in:

Increase in:

Asthma severity

- Asthma control
- Trips to emergency and fewer hospital admissions
- Better quality of life

Strategy:

The Community Asthma Program aims to provide asthma self-management support and education to children with chronic asthma and/or complex needs and their families in a way that is convenient and individualised (home-based, face-to-face) as well as flexible and holistic (using community / family / GP partnerships).

An Educator sees the child and family at least 3 times. Visits will include an initial assessment, education session and a six month review. **OR**

Group sessions allow the family to attend education sessions with other families.

Eligibility:

- All children will be assessed under an eligibility criteria
- The child must live within the municipalities of Darebin, Moreland, Hume, Moonee Valley/ Melbourne, Whittlesea, Maribyrnong, Hobsons Bay, Wyndham, Brimbank, Yarra, Banyule, Nillumbik, Boorondara, Richmond, Port Phillip or Stonnington

Classification of the pattern of paediatric asthma

Classification of Pattern	Common Features
Infrequent Episodic	Episodes 6-8 weeks apart or more Attacks usually not severe Symptoms rare between attacks Normal examination and lung function between episodes
Frequent Episodic	Attacks <6 weeks apart Attacks more troublesome Increasing symptoms between attacks Normal examination and lung function between episodes
Persistent	Daytime symptoms >2 days/week Nocturnal symptoms >1 night/week Attacks <6 weeks apart May have abnormal lung function Multiple ED visits or hospital admissions

RCH Best Practice Guidelines

www.rch.unimelb.edu.au/intranet/genmed/asthmabestpractice.htm

Asthma Cycle of Care (e.g. MBS Item 2546)

CAP can assist GPs to complete and claim this item – we provide patient education, assist with device use and make suggestions about content in an action plan

For more information, please contact CAP on 9345-5295

Kids Health information available on RCH internet:

http://www.rch.org.au/kidsinfo/factsheets.cfm?tabnav=a