Asthma- related Systems Change Logic Model

Inputs	**Clinic Goals**	**Short-term Activities**	**Mid-term Activities** (based on CCM)	**Mid-term outcomes** (pt & clinic levels)	**Long-term outcomes** (community level)
ALAMN specific: Mentors/Coaches Expertise/Intellectual capital Content Trainers NHLBI guidelines Clinic stipends ALAMN staff time Resources- • Spirometers • Lung models • Surveys Clinic specific: Management support Clinic staff time	Clinic specific goals: CAACP activities: • Recruit • Baseline rev • Lunch launch • Goal Setting • Ongoing evaluation assistance • TA related to clinic goals	Baseline Assessment Joint Clinic Meetings Trainings – • PACE • AECC • Pharmacy • Implementation Spirometry • Interpretation Spirometry Use of proven pathways PDSA cycles	Decision support • "Living with Asthma Survey" • Controller meds Delivery System Design • Flowsheets • Spirometry • AAP • Pt Ed / SM • Establish planned visits • Consistent ED follow-up Pt Educ / Self-Management Clinical Info Systems • Registry	Increase asthma severity rating Increase controller medication (ex: HEDIS measured by Medica) Increase spirometry Increase Asthma Action Plan Increase patient education • team approach • capacity to change Proactive outreach with registry	Decrease unscheduled office visits Increase quality of life (increase symptom free days) Decrease school absenteeism Decrease Emergency Department visits (Medica is measuring clinic specific for cohort 3) Decrease hospitalizations