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NATIONAL ENVIRONMENTAL LEADERSHIP AWARD
in Asthma Management

COMPREHENSIVE ASTHMA MANAGEMENT PROGRAM	GETTING RESULTS – EVALUATING THE PROGRAM	SUSTAINING THE PROGRAM

Application Guidelines and Evaluation Criteria for Health Care Providers

Your application should address the three evaluation areas on the tabs above:

- Area 1: Comprehensive Asthma Management Program;
- Area 2: Getting Results – Evaluating the Program; and
- Area 3: Sustaining the Program.

Each tab explains the area and links to the relevant Application Guidelines and Evaluation Criteria. Use the left column (Application Guidelines) as a roadmap to writing your story, making sure to cover the items in the right column (Evaluation Criteria), which the review panelists will use to evaluate your application.

Your responses to the three areas will be evaluated against criteria designed to discover and highlight national leaders. Be sure to include features of your program that are unique, innovative, creative or otherwise distinguish your program from others. You may receive up to 5 bonus points for distinguishing program features. Examples of program features that may be considered a distinguishing program feature are highlighted in the Evaluation Criteria.

You may collaborate with your partnering organizations on an application and you are encouraged to highlight key roles that these organizations play in delivering quality care (e.g., delivering clinical care services; providing school- or homebased interventions; or providing social services that allow people with asthma to focus on their asthma).

The key to winning the National Environmental Leadership Award in Asthma Management is to demonstrate that your comprehensive asthma management program:

- Embodies the *System for Delivering High-Quality Asthma Care* –including the key drivers of program effectiveness –as described in the *Communities in Action for Asthma-Friendly Environments* Change Package;
- Integrates the NIH EPR-3 Guidelines throughout the continuum of care;
- Includes a robust environmental component; and
- Achieves positive health and financial outcomes

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Area 1.a Management Structure and Operating Principles

Area 1. Comprehensive Asthma Management Program (70 points total)

In this section, describe your comprehensive asthma program, including your program's management structure and operating principles (1.a) as well as the *integrated health care services* (1.b), and *tailored environmental interventions* (1.c) your asthma program provides. Highlight *high-performing collaborations* that contribute to your success, and discuss your approach to reducing asthma disparities in the community you serve.

1.a Management Structure and Operating Principles (20 points)

Tell the story of how your asthma program:

- Came into existence and what **leaders** emerged as **champions** for your program;
- Established a dynamic organizational framework to manage its various elements and your role within the program;

And how your program continues to:

- Assess and address your target community's needs;
- Identify goals aligned with those needs;
- Maintain **strong community ties**.

Application Guidelines	Evaluation Criteria

• Describe when and how your comprehensive asthma program came into existence. What need did you recognize in your community and how did you organize to address those needs (e.g., who championed your effort, what organizations did you partner with)?
 	
• Discuss your goals and how they are aligned with your community's asthma care needs.
 	
• Describe how you identify those in need of your care and enroll them into your program. State the percentage of your community's asthma population you reach.
 	
• Describe your organizational structure.
	• The applicant identified and encouraged leaders and champions who helped to establish, build and promote the asthma program.
	
	• High-performing collaborations and partnerships help to achieve the program's goals, gain credibility within the target community, ensure delivery of services, and leverage resources.
	
	   - ***Example: Distinguishing Program Feature:*** *Partnerships with organizations that expand the program's reach or depth within the community or bring new skills to the program.*
	
	• Goals and strategy are comprehensive (i.e., address both medical and environmental management) and are aligned with the community's asthma care needs.
	
	   - ***Example: Distinguishing Program Feature:*** *Advocacy efforts aimed at creating asthmafriendly environments (e.g., support for local laws limiting exposure to secondhand smoke).*

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Area 1.a Management Structure and Operating Principles (continued)

Application Guidelines	Evaluation Criteria

• Describe how you engage community stakeholders in planning and implementation, as well as how you ensure that your program continues to reflect your community's needs. For example, explain how you effectively target disproportionately impacted or underserved populations.
 	
• Discuss how you make services accessible to people with asthma. Describe your approaches to increasing patient participation in your asthma program (e.g., outreach, patient incentives, pharmacy programs).
	• The program continually assesses and refines its service offerings and delivery based on feedback from the target community and takes action to continuously ensure **strong community ties** (e.g., participating in local organizations and activities, hiring from the local community, and including community stakeholders in program planning and implementation).
	
	  - *Example: Distinguishing Program Feature: The program effectively targets disproportionately impacted or disparate populations (e.g., providing underserved communities access to services).*
	
	• The program makes services accessible to its target community and employs approaches to increase patient participation in programs (e.g., targeted outreach, incentives for participation in program components, accessible office locations and hours).
	
	  - *Example: Distinguishing Program Feature: Effective community engagement that raises awareness of the program to increase or improve patient participation.*

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Area 1.b Integrated Health Care Services

1.b Integrated Health Care Services (20 points)

Describe the elements of your comprehensive asthma program and briefly explain how you ensure that the program delivers **integrated health care services** that incorporate the NIH EPR-3 Guidelines throughout the continuum of care.

Application Guidelines	Evaluation Criteria

• Describe how you assess a patient's asthma severity to determine initial treatment, continually assess the patient's level of control and adjust therapy as necessary, schedule follow-up care, and select medication and delivery devices to meet the patient's needs and circumstances.
 	
 • Discuss the roles various members of your health care teams play (e.g., primary care physicians, specialists, community health workers, asthma educators, case managers, advocates) in the delivery of asthma care.
 	
 • Describe approaches (e.g., provider incentives and training) to ensure that asthma practice guidelines are incorporated into clinical procedures across the continuum of care.
 	
 • Describe how patient education approaches and materials effectively translate the NIH EPR-3 Guidelines into practical and userfriendly information. Explain how you ensure that education is a component of every patient interaction, including who receives education, the reach of the services (number of percent of the asthma population reached), how frequently and under what circumstances or conditions (e.g., whether the frequency depends on asthma severity and control), how (e.g., in person, online, in clinical settings), and by whom.
 	
 • Describe approaches and procedures that ensure effective and timely communication among members of health care teams responsible for the delivery of clinical care and patient education.
 	
 • Describe centralized systems to collect, coordinate, manage and share information on patient enrollment, diagnoses, stratification, treatments and treatment plans, referrals, utilization, and outcomes across health care teams. If you have an asthma registry, discuss who can access it and the kind of patient information it contains.
	• *Integrated health care services* are comprehensive and the NIH EPR-3 Guidelines are incorporated throughout the continuum of care. The program:
	
	    - *Assesses asthma severity to initiate therapy;*
	
	    - *Assesses asthma control to monitor and adjust therapy;*
	
	    - *Provides self-management education and encourages use of an asthma action plan;*
	
	    - *Integrates education into all points of care where health professionals interact with patients; and*
	
	    - *Selects medication and delivery devices to meet patient's needs and circumstances.*
	
	    - ***Example: Distinguishing Program Feature:*** *Education, reimbursement, or incentive programs that effectively engage your providers in delivering care consistent with the NIH EPR-3 Guidelines to their patients.*
	
	    - ***Example: Distinguishing Program Feature:*** *Education materials and approaches are customized to be culturally appropriate and meet specific needs of the target audience.*
	
	 • Mechanisms to ensure effective and timely communication and collaboration among multidisciplinary teams (e.g., primary care physicians, specialists, case managers, community partners) responsible for implementing the comprehensive asthma program.
	
	 • Centralized methods to collect, coordinate, manage and share information on patient enrollment, diagnoses, stratification, treatments, and treatment plans, referrals, utilization, and outcomes across health care teams.
	
	 • High-performing collaborations and partnerships help to ensure delivery of integrated health care services.

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Area 1.c Tailored Environmental Services

1.c Tailored Environmental Services (30 points)

Describe the elements of the environmental component of your asthma program, addressing both indoor and outdoor environmental triggers. Explain how you ensure that you integrate environmental management throughout the continuum of care as well as **tailor environmental services** to address community and patient needs.

Application Guidelines	Evaluation Criteria

• Discuss the roles various members of your health care teams play (e.g., primary care, specialists, case managers, respiratory therapists, community health workers) in implementing the environmental management component.
 	
 • Discuss education and counseling services to patients and their families regarding environmental triggers and self-management, including who receives these services, the reach of the services (number or percent of the asthma population reached), how frequently and under what circumstances or conditions (e.g., whether the frequency depends on asthma severity and control), how (e.g., in person, online, in clinical settings), and by whom.
 	
 • Discuss education on environmental management provided to health care providers, including who receives training, the reach of the services (number or percent of providers reached), how frequently and under what circumstances or conditions (e.g., whether provider education is offered only to new providers), how (e.g., in person, online, in the provider's office), and by whom.
 	
 • Describe tools and materials (e.g., mattress and pillow cases, pest control devices, home cleaning supplies) you provide to your patients to help them manage their environmental triggers.
	• Elements of environmental management are addressed throughout the continuum of care.
	
	 • Patient education and outreach programs address indoor and outdoor environmental triggers and their management.
	
	    - *Example: Distinguishing Program Feature: Effective use of incentives to ensure patient participation.*
	
	 • Multi-faceted allergen control interventions address environmental management of asthma at home and in other settings (e.g., school and work) where patients spend time. Interventions may include home visits, durable equipment, asthma counseling (including smoking cessation), or social service referrals.
	
	    - *Example: Distinguishing Program Feature: Effective community engagement that spurs others in the community (e.g., schools, employers) to take actions to reduce exposure to environmental asthma triggers in schools, child care facilities, and work places.*
	
	    - Asthma patients are identified, their sensitivity to indoor and outdoor environmental triggers is assessed, and **environmental interventions are tailored** accordingly.

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Area 1.c Tailored Environmental Services (continued)

Application Guidelines	Evaluation Criteria
• Describe tools and materials distributed to your health care providers to support their clinical decisionmaking regarding environmental management of asthma (e.g., flip charts, electronic guidelines, or other diagnostic and treatment aids). • Describe your home-centered environmental management services, including who receives services, the reach of the services (number or percent of the asthma population reached) how frequently and under what circumstances or conditions (e.g., whether the frequency depends on asthma severity and control), what services are provided, and by whom. • Describe your school-, daycare-, and employer-centered environmental management services, including who receives services, the reach of the services (number or percent of the asthma population reached or number or percent of facilities affected), how frequently and under what circumstances or conditions (e.g., whether services are regularly scheduled or on a special request basis), how (e.g., at the employer's site or in your facilities), and by whom. • Discuss mechanisms (e.g., case management to coordinate care delivery) to ensure that health care professionals receive feedback regarding patient measures taken to manage indoor and outdoor environmental triggers.	• Health care professionals responsible for treating asthma are trained to ensure that they are knowledgeable about environmental triggers and their management. • Health care professionals responsible for treating asthma receive feedback regarding patient measures taken to manage exposure to indoor and outdoor environmental triggers. • *High-performing collaborations* and partnerships help to ensure delivery of tailored environmental services.

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Area 2. Getting Results – Evaluating the Program

Area 2. Getting Results – Evaluating the Program (15 points)

Describe how you evaluate outcomes, the results you may have achieved, and how you leverage these results to drive program improvement and program sustainability. Applicants describing only qualitative data, including anecdotal evidence, will receive partial credit. *Examples of qualitative measures include non-monetary returns such as reduced health disparities, stronger community relationships, or public relations or competitive advantages.*

Application Guidelines	Evaluation Criteria

• Discuss the measures your program tracks, both process measures and health outcome measures.
 	
• Describe how you track asthma patients, their health outcomes, and progress against program goals (e.g., through the use of an asthma registry, electronic medical records, or other system to collect and analyze information on patient diagnoses, treatments, referrals, interventions, utilization, and outcomes).
 	
• Describe the results you have achieved.
 	
• Describe the results you can attribute to your environmental asthma management activities.
 	
• Discuss how you use results internally (e.g., to drive program improvement and support planning) and externally (e.g., to attract funders and supporters).
 	
• Describe the results you have achieved in reducing asthma disparities in your community.
	• Processes and procedures are incorporated into the program's design to ensure that evaluation (i.e., data collection and analysis) is a routine part of the asthma program.
	
	  - ***Example: Distinguishing Program Feature:*** *Creative use of claims, pharmacy, or other data to track and improve health outcomes and delivery of services.*
	
	• The program tracks process measures (e.g., appropriate use of asthma medications, primary and specialty care visit rates).
	
	• The program tracks health outcome measures such as reduced hospitalizations and ER visits, improved quality of life, and symptom-free days.
	
	• The program tracks process measures and health outcomes attributable to environmental management (e.g., number of people with reduced exposure to environmental asthma triggers, number of patients implementing environmental controls).
	
	  - ***Example: Distinguishing Program Feature:*** *Ability to attribute results to environmental management of asthma.*
	
	• The program has achieved improved health outcomes compared to a baseline measurement.
	
	• Program evaluation data are shared and used internally and externally to guide strategic planning, program design, and implementation.

Area 3. Sustaining the Program (15 points)

Describe your program's sustainability plans. Discuss how you fund your asthma program. Additionally, discuss how you evaluate cost savings and return on investment. Explain how you use these results to drive program improvement and sustainability. Project future funding for your program over the next three to five years. *Examples of qualitative returns on investment include non-monetary returns such as reduced health disparities, stronger community relationships, or public relations or competitive advantages.*

Application Guidelines	Evaluation Criteria
• Describe current and long-term funding sources and revenue streams that sustain the comprehensive program's activities, in particular environmental management and patient education. • Discuss your reimbursement policies for asthma care, in particular for environmental management and patient education. • Discuss your methods for tracking costs and cost savings. • Describe cost savings or return on investment attributable to your comprehensive asthma program. • Describe how environmental management contributes to these cost savings or returns on investment. • Discuss how you use results internally (e.g., to drive program improvement and support planning) and externally (e.g., to attract funders and supporters).	• Long-term strategies for sustaining the comprehensive asthma program are in place. - *Example: Distinguishing Program Feature: A concerted effort to create, market, or negotiate revenue streams that ensure sustainability after outside funding lapses.* • Mechanisms are in place to sustain (for the long-term) environmental management and patient education (e.g., reimbursement policies). • Analysis of costs or return on investment is a routine part of managing the asthma program. • The program has achieved cost savings or positive return on investment compared to a baseline measurement. • The program makes a concerted effort to attribute the contribution of environmental management to cost savings or return on investment. • Cost savings data are shared and used internally and externally.