Sample Best Practices	s - ACT Ambassador Pilot Sites
Discipline	Best Practices
Leadership	 Keep providers updated on new treatment modalities and guidelines. Provide education to providers, RNs, and pharmacists regarding accurate diagnosis with spirometry, albuterol overuse, and updated asthma guidelines. Provide scholarships to PHN to attend the Asthma Educator Institute for training. Create a strategic asthma action plan, and develop an asthma pilot program using a Plan-Do-Study-Act (PDSA) to ensure specific, measurable, achievable, relevant, and time specific (SMART) goals for each cycle. Obtain spirometry for facility and have nurses complete certification in performing spirometry.
Clinic	Raise asthma awareness among patients by providing educational materials.
	 Implement spirometry service, expanding access for patients in primary care and improving early and accurate diagnosis of asthma. Follow up appointments scheduled every 3 months, alternating between virtual and in-person visit once the patient achieves control. Create an interprofessional asthma clinic with an Asthma Certified Educator Pediatric Nurse Practitioner, and integrated pharmacist, an LPN who conducts thorough screenings, including spirometry tests for children.
Nursing	Improved patient instruction on inhaler devices and frequent reviews of medication adherence.
	 Have nurses and providers ask about asthma control during triage and medical visits. Surveys to track patient progress (e.g., Asthma Control Test). Provide proper education on inhaler administration technique.
Public Health Nursing	 During Asthma Awareness month (May), schedule educational posting on social media. Publish weekly flier on health issues, including air quality information for local community.
Pharmacy Information Technology	 Address patient concerns, provide medication and device counseling, and modify treatments as permitted by a Collaborative Practice Agreement. Expand the role of clinical pharmacists through pharmacist-driven inhaler assessment and optimization of medication therapy to maximize adherence, maintain control of symptoms, and prevent exacerbations. Add pharmacist management of asthma patients to pharmacy principal clinics as a quality improvement measure. Identify patients who may benefit from the asthma program though provider referrals, reviewing maintenance and rescue inhaler refill history, and screening those who present to the emergency department for respiratory conditions. Assign subject matter expert pharmacist to provide academic detailing to providers. Provide peak flow meters and log books to each patient to help develop written asthma action plans. Place limits on albuterol refills and not auto-fill albuterol prescription refills. Provide patients with fliers of programs and bag tags added to their prescriptions. Improve asthma control and patients' outcomes through access to skilled pharmacists. Compile tools, note templates, workflows, and train clinical pharmacists on the inCheck Dial. Utilize claims data from own independent third-party administration to identify patients and provide outreach to help them manage their conditions. Track number of albuterol inhalers dispensed, number of spirometry tests performed, and number of asthma exacerbations seen in the clinic to evaluate effectiveness.
Community	 Have designated center of excellence pulmonary specialist group that works to ensure severe asthma patients receive the best possible care. Have environmental health specialists conduct home assessments that include identification, management of asthma triggers and follow-up. Provide high quality air filtration units for every tribal household. Set up air quality monitoring equipment to track air quality in community area and communicate findings to local community.