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Georgia Asthma Control Program: Comprehensive Asthma Control Through Evidence-based Strategies and Public Health-Health Care Collaboration

Strategic Evaluation Plan for 2014-2019

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We Protect Lives.

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Strategic Evaluation Plan for the Georgia Asthma Control Program: Comprehensive Asthma Control Through Evidence-based Strategies and Public Health-Health Care Collaboration

1. Program Background and Purpose of the Strategic Evaluation Plan

Program Background

Asthma is a chronic disorder of the airways characterized by inflammation and narrowing of the airways resulting in episodes of wheezing periods, chest tightness, shortness of breath and cough, particularly at night or in the early morning. This complex disorder is associated with physiological (e.g., self-efficacy), social (e.g. access to medical care), environmental (in-home allergens), and behavioral (e.g. medication adherence) factors¹. The goal of asthma treatment is to control the disorder thus minimizing their risk of asthma exacerbations and other symptoms.

Asthma is a high priority public health condition among children 0 -17 years of age in Georgia with a prevalence rate of 10.8%². In 2012, more than sixteen percent of Georgia children reported being told by a healthcare professional that they have asthma. The highest rates of asthma occur among boys (12.6%); non-hispanic black children (15.6%); and among children in households with income less than \$25,000, lower levels of education and homes with known environmental triggers.

In 2012, there were 29,035 asthma-related emergency room (ER) visits and 3,075 asthma-related hospitalizations². The ER visit rate was almost four times higher among black children compared to white children. The total cost on the healthcare system was estimated at \$83.3 million. This is a \$15.3 million increase in total cost compared to 2010.

The Centers for Disease Control and Prevention's (CDC) National Asthma Control Program (NACP) provides funding and technical assistance to state departments of public health to implement evidence-based and best practices strategies for the diagnosis and management of asthma.

The mission of the Georgia Asthma Control Program (GACP) is to improve asthma control and reduce its burden in Georgia by a focused commitment to policy and environmental change, education, and an integrated care delivery system. The program's primary five-year focus is children with asthma ages 0-17.

GACP has been funded by NACP since 2001, and in 2014 was awarded a five-year cooperative agreement to promote Comprehensive Asthma Control through Evidence-based Strategies and Public Health – Health Care Collaboration. The award's purpose is to maximize the reach, impact, efficiency, and sustainability of comprehensive asthma control services.

¹ Schulte A, Musolf J, Meurer JL, Cohn JH, Kelly KJ. (2004). Pediatric asthma care management: a review of evidence and an experimental study design. *J Journal of Pediatric Nursing*, 19(4), 304-310.

² Georgia Department of Public Health. (2015). *2015 Georgia Data Summary: Asthma in Children* [Factsheet].

Providing comprehensive care at a population level requires a stepwise approach to ensure that people with asthma receive all, not just some, of the services they need.

The GACP logic model describes the relationships between the programs' activities and its intended outcomes. Elements of the logic model include inputs, strategies and activities, outputs and outcomes (**Figure 1**).

Inputs represent the human capital, financial, organization, and community resources available to the program. GACP's inputs include established state asthma program, surveillance system, Georgia Asthma Advisory Coalition, state agency and strategic partners, and evidence based and promising practices.

Strategies and Activities describe the work of the program. GACP's activities are related to the three strategy areas: *infrastructure strategies* to support leadership, strategic partnerships, strategic communications, surveillance, and evaluation; *services strategies* to expand school and home-based services; and *health systems strategies* to improve coverage, delivery, quality, and use of clinical services

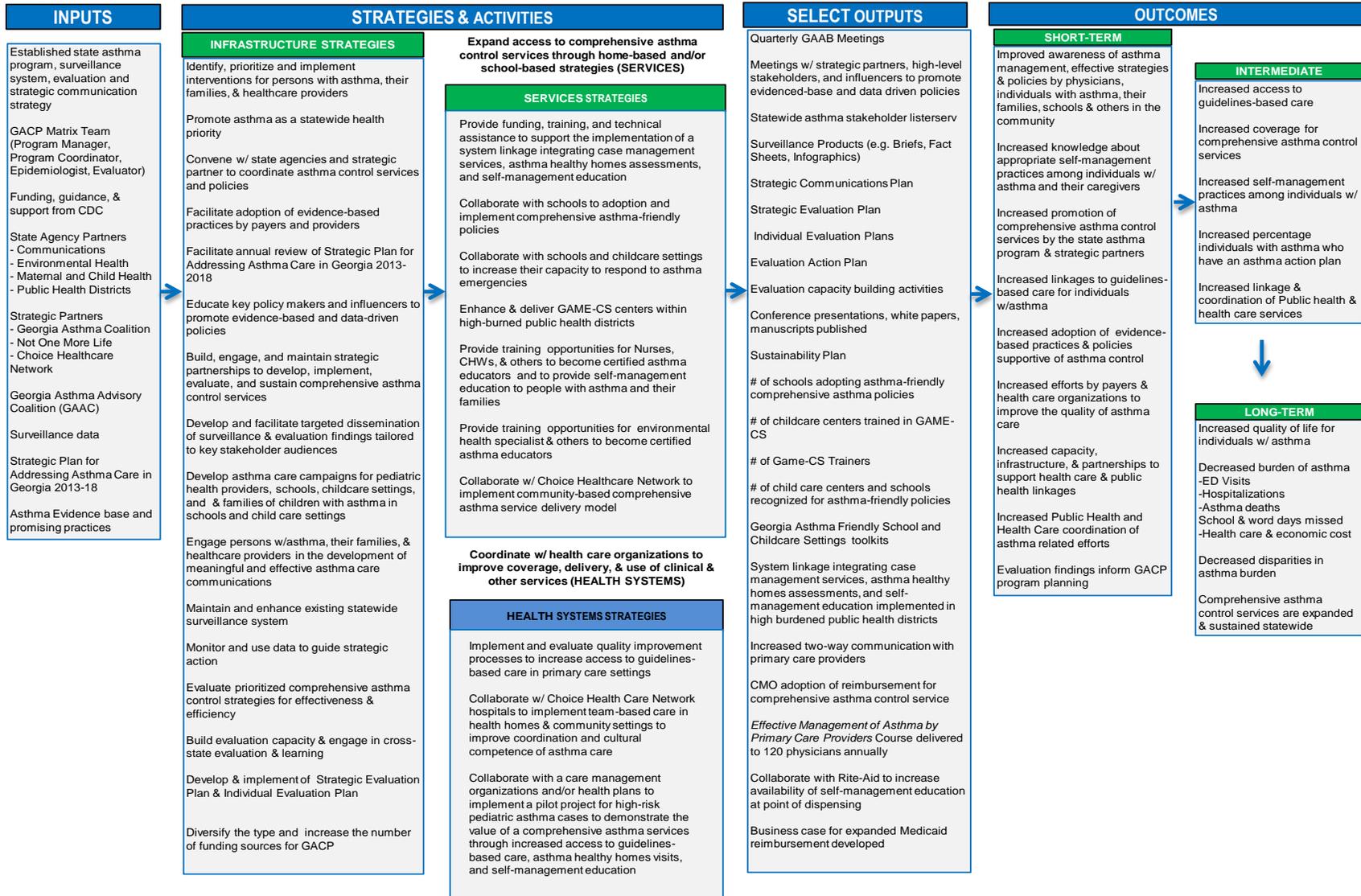
Outputs are the direct products of program activities and may include types, levels and targets of services delivered by the program.

Outcomes are the results of implementing the program activities. Outcomes progress in sequential order, from short-term to intermediate outcomes, and eventually to long-term impacts. The short-term and intermediate outcomes provide achievable milestones to determine if the program is progressing as expected.



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Purpose of Plan

Evaluation plays a central role in organizational learning, program planning, decision-making and measurement of the three strategy areas: infrastructure, services, and health systems strategies. The ultimate goal is to determine the efficiency and effectiveness of the Georgia Asthma Control Program in promoting comprehensive asthma control services through evidence-based strategies and public health – health care collaboration.

This strategic evaluation plan is a roadmap that lays out the direction, rationale, scope and sequence of program evaluation activities during the 5-year cooperative agreement cycle. The plan is a living document that will be reviewed annually by the Asthma Data and Evaluation Workgroup to ensure its continued alignment with the program and stakeholders needs

As an action-oriented management tool, evaluation findings are intended to demonstrate the effectiveness and efficiency of program initiatives; identify areas to build, strengthen and enhance initiatives. Evaluation progress and findings will be reported on a quarterly basis. The GACP evaluator will work collaboratively with program staff and stakeholders to develop an action plan based on evaluation findings; the action plan will identify targeted recommendations and action steps necessary to implement the recommendations.

2. Methods for Developing the Strategic Evaluation Plan

The Strategic Evaluation Plan was developed in accordance with the steps and standards of the *CDC Framework for Program Evaluation in Public Health*³ and the utilization-focused guide, *Learning and Growing through Evaluation: State Asthma Program Evaluation Guide*⁴.

Stakeholders

Engaging stakeholders in the evaluation process is the first step toward a utilization – focused evaluation, as stakeholders are much more likely to buy-in and support evaluation activities if they are involved in the process from the beginning.

A diverse group of internal and external stakeholders participated in the strategic evaluation planning process (**Appendix A**). Internal partners include the Director of Evaluation & Support Program – Environmental Health Section, Children’s Medical Services Public Health Nurse Coordinator, Chronic Disease Health Promotion Coordinator, Environmental Health Specialist, Public Health Educator, and the GACP matrix team (program manager, program coordinator, and epidemiologist). External partners are experts in the field of public health surveillance and epidemiology, family medicine, and pulmonology. The GACP Evaluator leads the design and implementation of all evaluation activities.

³ Centers for Disease Control and Prevention. Framework for Program Evaluation. MMWR 1999;48(No. RR-11):1-40.

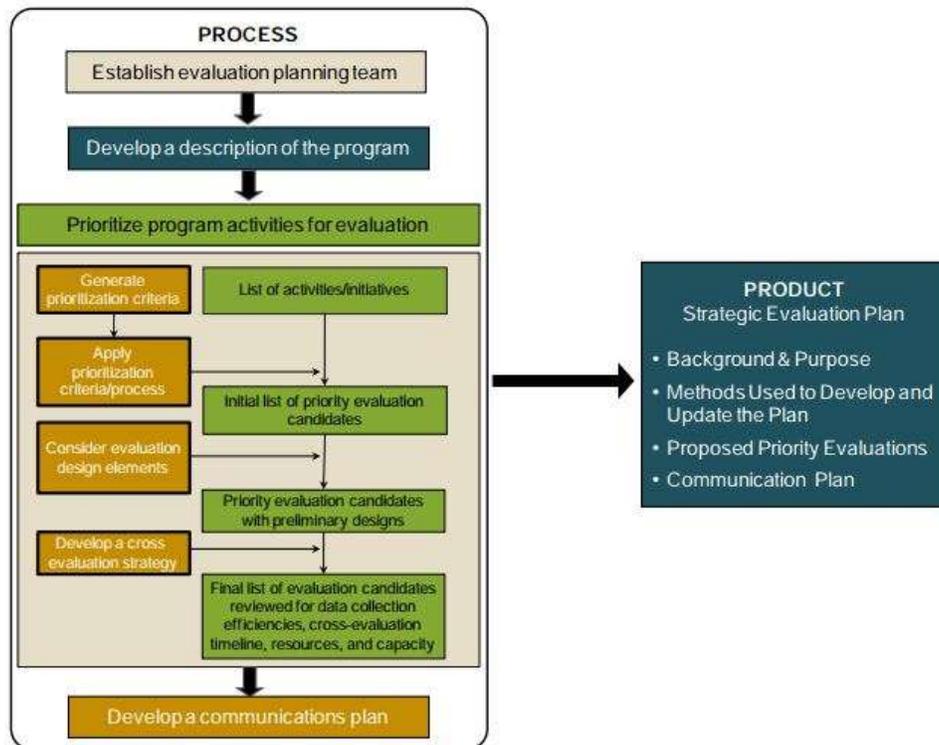
⁴ Centers for Disease Control and Prevention. Learning and Growing through Evaluation: State Asthma Program Evaluation Guide. Atlanta, GA: Centers for Disease Control and Prevention, National Center for Environmental Health, Division of Environmental Hazards and Health Effects, Air Pollution and Respiratory Health Branch, April 2010.

The engagement of stakeholders in the planning process was informed by a stakeholder assessment completed by the GACP matrix team and informed by external partners.

Stakeholder input throughout the evaluation process includes:

- Ensuring the cultural and contextual competency of evaluation activities
- Prioritizing and designing evaluation activities
- Ensuring the utility and feasibility of evaluation activities
- Monitoring the implementation of the strategic evaluation plan
- Interpreting evaluation findings
- Disseminating evaluation findings
- Contributing to the use of evaluation findings
- Building evaluation capacity

Figure 2: Strategic Evaluation Planning Process and Products



Method Used to Develop the Strategic Evaluation Plan

The initial program logic model and description was developed by the GACP matrix team using reference documents such as the EH 14-404 funding announcement, project narrative, workplan, and Strategic Plan for Addressing Asthma in Georgia. The initial logic model and description was distributed during the first strategic evaluation planning team meeting for discussion and feedback. The program description was synthesized into a series of program activity profiles, which lays out the purpose, description, key partners, and intended outcomes of each activity (**Appendix B**).

After the program description was developed, evaluation planning stakeholders were engaged in a systematic process to prioritize activities for evaluation. Each criteria and how the criteria were applied, and the calculated weight of each criteria is listed in **Table 1**.

Table 1: Criteria for Evaluation Prioritization

Criteria	How Criteria were Applied	Calculated Criteria Weight
Plan Alignment	How closely aligned is this activity with our state asthma plan?	0.24
Focus	Does this activity affect those most burdened by asthma?	0.15
Reach	Will this activity reach a substantial amount of individuals most burdened by asthma?	0.18
Disparities	Will this activity reduce asthma disparities?	0.18
Information need	How critical is this activity for making near-term decisions?	0.32
Improvements	Would evaluating this activity likely result in recommendations for programmatic improvements?	0.24
Use	Is it likely that the intended audience will use results or recommendations from this evaluation?	0.38
Sustainability	How much does this activity contribute to the sustainability of the state asthma program?	0.23

The GACP Evaluator designed an interactive online prioritization survey to facilitate the application of the prioritization criteria to the potential evaluation candidates (**Appendix C**). Survey respondents were able to refer to the program logic model and activity descriptions throughout the survey. The survey was shared with stakeholders for review and feedback prior to the survey launch date.

The prioritization survey consisted of two parts – (1) Ranking the prioritization criteria in order of important for prioritizing evaluation candidates. Responses to this activity was summarized and translated into weights for each criterion. (2) Ranking the potential evaluation candidates against the prioritization criteria on a scale of 1 – 3 where –

- 1 = Tactical** This activity is a functional enhancement; evaluation of this activity is not required but should be conducted if resources permit.
- 2 = Strategic Alignment** This activity supports programmatic goals; evaluation of this activity is required eventually but could wait until later if necessary.
- 3 = Mission Critical** This activity is mission critical activity; evaluation of this activity is essential for achieving programmatic goals.

This activity yielded a “raw rank score” for each potential evaluation candidate. The weighted rank of each evaluation candidate was calculated by applying the criteria weight to the raw rank scores. Activities with the highest weighted rank are considered highest priority for evaluation.

3. Proposed Priority Evaluations

Priority Evaluation Candidates

After reviewing the results of the prioritization survey, evaluation planning stakeholders engaged in a consensus building conversation to determine the most appropriate number of evaluations to propose for the 5-year cooperative agreement cycle, taking into account financial and human capital resources.

The top three highest ranked program activities were prioritized for evaluation – Surveillance, Cross-DPH Multicomponent, Multi-Trigger Intervention for Asthma, Asthma Practice Improvement.

Table 2. Rank-Ordered List of Evaluation Candidates

Rank	Evaluation Candidate	Strategy Area
1	Surveillance	Infrastructure
2	Cross-DPH Multicomponent, Multi-Trigger Intervention for Asthma	Service
3	Asthma Practice Improvement Initiative	Health System
4	Health Systems Innovations for Asthma in Community Health Settings	Health System
5	Georgia Asthma-Friendly School Policy & Best Practices	Service
6	Strategic Partnerships	Infrastructure
7	Program Administration	Strategy Area
8	Strategic Communications	Infrastructure
9	Georgia Asthma Management Education in Child care Settings (GAME-CS)	Service

Preliminary Design of Prioritized Evaluation Candidates

The evaluation purpose, preliminary questions and design for the prioritized evaluation candidates were developed through a series of evaluation stakeholder meetings. The preliminary design of the prioritized evaluation candidates is presented below in a series of matrices below. Individual plans will be developed to systematically evaluate the prioritized evaluation activities.

Table 3.1: Surveillance Evaluation Matrix

Strategy Area: Infrastructure	
Surveillance	
Purpose of Activity	To increase the use of asthma surveillance data by partners and stakeholders for the planning, implementation, and evaluation of interventions.
Key Partners	State Agency Partners (Inc. Epidemiology, Office of Indicators for Planning, Public Health Districts) Georgia Asthma Advisory Board, Georgia Asthma Coalition
Title of Evaluation	Evaluation of asthma surveillance packaging and dissemination efforts
Purpose of Evaluation	To determine the effectiveness and efficiency of surveillance product packaging and dissemination efforts.
Evaluation Questions	<ol style="list-style-type: none"> 1. To what extent is asthma data accessible to stakeholders in the most appropriate format to inform program planning, implementation, and evaluation)? <ol style="list-style-type: none"> a. Who is accessing asthma surveillance data? b. Are there gaps in the data that is presently available? c. What technical assistance on data access and interpretation? 2. To what extent do users rate asthma surveillance products as accessible, user-friendly, and useful? 3. To what extent is asthma surveillance data used to inform policy and program planning efforts across the state?
Evaluation Design	Quasi-Experimental Mixed Methods Design
Data Collection Methods	Survey; Focus Group Protocol; Semi Structured Interview Protocol
Data Sources	State Agency & Strategic Partners; Epidemiologist On-Call Log; Asthma Epidemiologist
Audience	Georgia Department of Public Health Chronic Disease Prevention Section Leadership; GACP Matrix Team; Asthma Data and Evaluation Workgroup; Georgia Asthma Advisory Board; State Agency and Strategic Partner (inc. Public Health Districts, Cross-Departmental Asthma Priority Workgroup, Local Health Care Payers and Providers); Individuals with Asthma and their Families

Table 3.2: Cross-DPH Multicomponent, Multi-Trigger Intervention for Asthma Evaluation Matrix

Strategy Area: Service	
Cross-DPH Multicomponent, Multi-Trigger Intervention for Asthma	
Purpose of Activity	To provide self-management education, case management services, and asthma health homes assessments to children (0-17 years of age) with a diagnosis of not well-controlled or very poorly controlled asthma dually enrolled in Medicaid and DPH’s Maternal and Child Health Children’s Medical Services (CMS) Program.
Key Partners	DPH Maternal and Child Health Section Children’s Medical Services, DPH Environmental Health – Healthy Homes Program, Public Health Districts
Title of Evaluation	Feasibility Assessment and Cost Effectiveness Analysis of a Pilot Multicomponent/Multitrigger Intervention for Pediatric Asthma in Georgia
Purpose of Evaluation	To determine the feasibility and cost effectiveness providing home-based, multi-component, multi-trigger program intervention to address high-risk pediatric asthma cases in high-burdened public health districts in Georgia.
Evaluation Questions	<ol style="list-style-type: none"> 1. Is the MCMT program a feasible model mechanism for delivering comprehensive home-based asthma care? <ul style="list-style-type: none"> o How many asthma healthy homes visits did each participant receive? o How many self-management education modules did each participant complete? o Is the program being delivered as intended to the target recipients? 2. To what extent does the individual with asthma and their family/caregiver feel more confident to management asthma in the home? 3. To what extent have participants enrolled in the MCMT intervention experienced a decreased burden of asthma and health outcome disparities? 4. To what extent is the MCMT intervention a cost effective model for reducing the burden of asthma and health outcome disparities among program participants?
Evaluation Design	Quasi-Experimental Mixed Methods Design
Data Collection Methods	Survey; Chart Abstraction; Semi Structured Interview Protocol; Administrative Claims Data Screening Form; Safe & Healthy Homes Assessment and Action Plan; Wee Breathers Curriculum Pre/Post Test; Pediatric Asthma Mortality Reporting; Administrative Claims Data
Data Sources	Asthma Experience Survey; Medical Records; Environmental Specialist, Children’s Medical Services Nursing Staff
Primary Intended Users	GACP Matrix Team; Asthma Data and Evaluation Workgroup; Georgia Asthma Advisory Board; State Agency and Strategic Partner (inc. Public Health Districts, Cross-Departmental Asthma Priority Workgroup, Local Health Care Payers and Providers); Individuals with Asthma and their Families

Table 3.3: Asthma Practice Improvement Evaluation Matrix

Strategy Area: Health Systems	
Asthma Practice Improvement	
Purpose of Activity	To increase primary care providers' knowledge and awareness of the National Asthma Education and Prevention Program (NAEPP) Expert Report – 3 (EPR–3) evidence-based guidelines for the diagnosis, treatment and management of asthma; increase their use of EPR-3 guidelines; increase their confidence as a primary care asthma resource.
Key Partners	Not One More Life, Children’s Healthcare of Atlanta, Pediatric Healthcare Improvement Coalition, Choice Healthcare Network, Public Health Districts, Local Healthcare Payors and Providers
Title of Evaluation	Assessment of pilot practice improvement initiative to improve Pediatric Asthma Care
Purpose of Evaluation	To assess provider knowledge and use of evidenced-based practices for the diagnosis, treatment and management of asthma according to the National Asthma Education and Prevention Program (NAEPP) Expert Report – 3 (EPR–3) guidelines.
Evaluation Questions	<ol style="list-style-type: none"> 1. What us the efficacy of the intervention design (e.g. recruitment of target population, method of information transfer, materials, incentives)? 2. To what extent has the provider improvement training influenced provider skill, knowledge and level of confidence for providing asthma care? 3. To what extent have providers adopted evidence-based guidelines for asthma care? <ol style="list-style-type: none"> a. What are the barriers and facilitators to adopting evidence-based guidelines? b. Are physicians able to access to decision support tools to implement key clinical activities? 4. To what extent are physicians able to influence practice system redesign to support optimal asthma care?
Evaluation Design	Quasi-Experimental Mixed Methods Design
Data Collection Methods	Practice Improvement CME Course Pre/Post Test; Survey; Chart Abstraction; Site Observation Protocol; Semi Structured Interview Protocol; Administrative Claims Data
Data Sources	Medical Records; Administrative Claims Data; Patients and Providers
Primary Intended Users	GACP Matrix Team; Asthma Data and Evaluation Workgroup; Georgia Asthma Advisory Board; State Agency and Strategic Partner (inc. Public Health Districts, Cross-Departmental Asthma Priority Workgroup, Local Health Care Payers and Providers); Individuals with Asthma and their Families

Proposed Methods for Updating the Strategic Evaluation Plan

The Strategic Evaluation Planning Team will be restructured into the Asthma and Data Evaluation Workgroup. The team will convene on a quarterly basis to monitor the implementation of evaluation activities and to build evaluation capacity among internal and external state. The workgroup will review the strategic evaluation plan annually to ensure its continued alignment with program goals and stakeholder interest.

The Asthma Data and Evaluation Workgroup will be comprised of strategic decisions makers with a contextual understanding of asthma initiatives in Georgia and the populations served, data analytic and evaluation technical expertise. The workgroup members are expected to champion evaluation and the use of evaluation findings, conduct an annual review of the strategic evaluation plan, ensure the cultural and contextual competency of evaluation activities, analyze and interpret evaluation findings, disseminate evaluation findings, and build evaluation capacity.

Figure 3: Evaluation & Capacity Building Timeline

	Year 1 (2014-2015)	Year 2 (2015-2016)	Year 3 (2016-2017)	Year 4 (2017-2018)	Year 5 (2018-2019)
Evaluation		Evaluation of asthma surveillance packaging and dissemination efforts			
			Feasibility Assessment and Cost Effectiveness Analysis of a Pilot Multicomponent/Multitrigger Intervention for Pediatric Asthma in Georgia		
			Assessment of pilot quality improvement initiative to improve Pediatric Asthma care		
					Summative Evaluation Report
Capacity Building	Strategic Evaluation Planning Team	Asthma Data and Evaluation Workgroup; Individual Evaluation Planning Teams			
		Evaluation Webinar Series (Quarterly)			
		Evaluation Workshop (Annually)			
		Cross-State Learning and Evaluation Activities			
		Professional Development			

Capacity Building

Evaluation Capacity Building (ECB) seeks to build and reinforce the infrastructure to support evaluation, build and expand on peer learning, and expand access to resources to support evaluation. The goal of ECB is to create and sustain organizational processes to promote a culture of evaluation. The GACP matrix team, Asthma Data and Evaluation Workgroup, Asthma Priority Workgroup, and other internal and external asthma stakeholders are expected to participate in ECB activities. The ECB activities that will take place during the 5-year cooperative agreement cycle are described below.

1. **Recruit and routinely convene the Asthma Data and Evaluation Workgroup.** The purpose of the Asthma Data and Evaluation Workgroup is to monitor the implementation of the strategic evaluation plan and to build evaluation capacity among internal and external stakeholders. The first workgroup meeting will be held in first quarter of year two.
2. **Evaluation Webinar Series.** The GACP evaluator will develop a quarterly webinar series to build and reinforce the knowledge of evaluation principles and practices. Potential webinar topics include – *Evaluation: What is It and Why Do It?, Metrics & Measurements, Data Interpretation and Visualization, Reporting, and Mixed Methods Evaluations*. The first webinar will be held during the first quarter of year two.
3. **Evaluation Workshop.** The GACP evaluator will develop and facilitate an annual workshop training to build and reinforce the knowledge of evaluation principles, practices, and application. The workshop topics will be selected by polling internal and external stakeholders. The first workshop will be held during the third quarter of year two.
4. **Cross State Learning and Evaluation Activities.** The GACP evaluator will participate in cross-state evaluation activities with other funded State Asthma Program to promote peer-peer learning. The evaluator will also explore the possibility conducting a Cross-Site evaluation.
5. **Professional Development**
The GACP Evaluator will participate in CDC monthly technical assistance calls, quarterly evaluation calls, and other CDC technical assistance and annual meeting offerings to foster professional development. The evaluator will present evaluation findings at state and national conferences including the Georgia Public Health Association, American Evaluation Association and American Public Health Association.

4. Communications Plan

Communication is a vital aspect of disseminating evaluation findings. Evaluation findings will be disseminated through a variety of methods to include professional conferences and meetings, formal and informal evaluation reports, webinars, scholarly journal publications, and other publications (i.e. evaluation briefs, DPH public health weekly newsletter). Findings will also be shared with other state asthma programs, as well as other state, federal, and national level stakeholders interested in the Georgia Asthma Control Program via a webinar that will also be made available on the Georgia DPH website.

The primary intended users of evaluation findings include –

- **Audience 1:** Georgia Department of Public Health Chronic Disease Prevention Section Leadership, GACP Matrix Team
- **Audience 2:** Asthma Data and Evaluation Workgroup
- **Audience 3:** Georgia Asthma Advisory Board
- **Audience 4:** State Agency and Strategic Partners
 - Centers for Disease Control and Prevention
 - Georgia Asthma Coalition
 - Cross-Departmental Asthma Priority Working Group (inc. Chronic Disease Prevention Section, Environmental Health, Maternal and Child Health, Office of Nursing),
 - Public Health Districts
 - Strategic Partners (e.g. Georgia Hospital Association, Georgia Department of Early Care and Learning, Georgia HeadStart Association, Not One More Life, Choice Health Care Networks)
 - Local Health Care Payers and Providers
 - Policymakers
- **Audience 5:** Individuals with Asthma and their Families

Table 4: Communications Plan Matrix

Information and Purpose	Audience(s)	Possible Format	Timeline	Responsibility Party
Present Final Strategic Evaluation Plan	1-4	Email, Webinar	Year 2, Quarter 1	Evaluator
Post Strategic Evaluation Plan to Website	1-4	Website	Year 2, Quarter 1	Evaluator
Review Strategic Evaluation Plan Priorities	1-4	Email, In-Person Meetings	Annually	Evaluator
Announce Strategic Evaluation Plan Revisions	1-4	Email, Webinar	As Necessary	Evaluator
Evaluation Progress Report	1-4	Email, Presentation, Report	Quarterly	Evaluator
Evaluation Findings and Lessons Learned	1-5	Email, Webinar, Conferences, Report, Infographic, DPH Weekly, Journal, DPH Weekly (Newsletters), Community Meetings (e.g. Parent teacher Associations, Community Groups), Website, Press Release	As Necessary	Evaluator
Promote cross-state learning and cross-site evaluation activities	1-4	Webinar, Virtual Community of Practice	As Necessary	Evaluator
Use of Evaluation Findings	1-5	Email, Webinar, Report, Conferences, DPH Weekly Newsletter, Journal	Annually	GACP matrix Team
Announce upcoming evaluation activities (e.g. workgroup meetings, workshops/webinars)	1-4	Email, DPH Weekly Newsletter, Website	As Necessary	Evaluator
Promote evaluation capacity building activities	1-4	Email, Webinar, DPH Weekly Newsletter, Infographic, Factsheet,	Quarterly	Evaluator
Synthesis of findings and lessons learned during cooperative agreement cycle	1-5	Email, Webinar, Conferences, Report, Infographic, DPH Weekly Newsletter, Journal, Community Meetings (e.g. Parent Teacher Associations, Community Groups), Website, Press Release	Final Year of Cooperative Agreement	GACP Matrix Team

Audience 1 - Georgia Department of Public Health Chronic Disease Prevention Section Leadership, GACP Matrix Team

Audience 2 - Asthma Data and Evaluation Workgroup

Audience 3 - Georgia Asthma Advisory Board

Audience 4 - State Agency and Strategic Partners

Audience 5 - Individuals with Asthma and Their Families

5. Conclusion

The mission of the Georgia Asthma Control Program is to improve asthma control and reduce its burden in Georgia by a focused commitment to policy and environmental change, education, and an integrated care delivery system. Over the next five years, the program will implement strategies aimed at maximizing the reach, impact, efficiency, and sustainability of comprehensive asthma control services.

The asthma program and stakeholders are committed to a culture of evaluation to demonstrate the effectiveness and efficiency of program activities. This 5-year strategic evaluation plan is a living roadmap that lays out the direction, rationale, scope and sequence of program evaluation activities. The plan will be reviewed annually to endure its continued alignment with the goals of the program and stakeholders.

Appendix

Appendix A	Strategic Evaluation Planning Stakeholders – Contributions, Roles, and Future Involvement
Appendix B	Activity Profiles
Appendix C	Prioritization Survey

Appendix A: GACP Strategic Evaluation Planning Stakeholders – Contributions, Roles, and Future Involvement

Stakeholder Name, Team Participation	Title and Affiliation	Expertise	Contribution to Evaluation Planning	Role in Future Evaluations
<p>Nicolle Dally, MPH</p> <p>GACP Matrix Team Strategic Evaluation Planning Team</p>	<p>Program Evaluator, Georgia Department of Public Health</p>	<p>Program Monitoring and Evaluation</p>	<p>Lead the design and implementation of evaluation activities</p>	<p>Lead the design and implementation of evaluation activities</p>
<p>Bridgette Massey Blowe, MPH</p> <p>GACP Matrix Team</p>	<p>Program Coordinator, Georgia Asthma Control Program, Chronic Disease Prevention Section, Georgia Department of Public Health</p>	<p>Educational System Interventions</p>	<p>Developed program description, prioritization criteria and ranked the evaluation candidates; Developed preliminary evaluation design; informed timeline, evaluation capacity building activities, and communication plan</p>	<p>Serve on Asthma Data and Evaluation Workgroup</p>
<p>Emeka Oraka, MPH</p> <p>Strategic Evaluation Planning Team</p>	<p>Chief Executive Officer, Orion Research Group</p>	<p>Public Health Surveillance; Monitoring and Evaluation</p>	<p>Developed program description, prioritization criteria; Developed preliminary evaluation design; informed timeline, evaluation capacity building activities, and communication plan</p>	<p>Serve on Asthma Data and Evaluation Workgroup; Serve on individual evaluation planning team; Implement prioritized evaluation</p>
<p>Francesca Lopez, MSPH, AE-C</p> <p>GACP Matrix Team</p>	<p>Program Manager, Georgia Asthma Control Program, Chronic Disease Prevention Section, Georgia Department of Public Health</p>	<p>Public Health (Asthma Diagnosis, Management & Treatment)</p>	<p>Developed program description, prioritization criteria; Developed preliminary evaluation design; informed timeline, evaluation capacity building activities, and communication plan</p>	<p>Serve on Asthma Data and Evaluation Workgroup; Serve on individual evaluation planning team</p>

<p>Janay McCloud</p> <p>Strategic Evaluation Planning Team</p>	<p>Public Health Educator, Georgia Department of Public Health</p>	<p>Public Health Education Interventions</p>	<p>Developed program description, prioritization criteria and ranked the evaluation candidates; Developed preliminary evaluation design; informed timeline, evaluation capacity building activities, and communication plan</p>	<p>Serve on Asthma Data and Evaluation Workgroup; Serve on Individual Evaluation Planning Team</p>
<p>Jimmie Smith, MD, MPH</p> <p>Strategic Evaluation Planning Team</p>	<p>Assistant Professor of Practice, & Liaison for Academic Health Department, Mercer University</p>	<p>Family Medicine, Public Health</p>	<p>Developed program description, prioritization criteria and ranked the evaluation candidates; Developed preliminary evaluation design; informed timeline, evaluation capacity building activities, and communication plan</p>	<p>Serve on Asthma Data and Evaluation Workgroup; Serve on Individual Evaluation Planning Team; Implement prioritized evaluation</p>
<p>Kathy Sundberg, RN</p> <p>Strategic Evaluation Planning Team</p>	<p>Nurse Coordinator, Maternity and Child Health Children’s Medical Services Program</p>	<p>Public Health Nurse</p>	<p>Developed program description, prioritization criteria and ranked the evaluation candidates; Developed preliminary evaluation design; informed timeline, evaluation capacity building activities, and communication plan</p>	<p>Serve on Asthma Data and Evaluation Workgroup; Serve on Individual Evaluation Planning Team</p>
<p>Kia Powell-Threets, MS</p> <p>Strategic Evaluation Planning Team</p>	<p>Director, Reporting & Evaluation Unit, Chronic Disease Section, Georgia Department of Public Health</p>	<p>Monitoring & Evaluation; Data Systems</p>	<p>Developed program description, prioritization criteria and ranked the evaluation candidates; Developed preliminary evaluation design; informed timeline, evaluation capacity building activities, and communication plan</p>	<p>Serve on Asthma Data and Evaluation Workgroup</p>

<p>Luis Munoz Strategic Evaluation Planning Team</p>	<p>Regional Healthy Homes Coordinator, Environmental Health Section, Georgia Department of Public Health</p>	<p>Public Health (Environmental Health)</p>	<p>Developed program description, prioritization criteria and ranked the evaluation candidates; Developed preliminary evaluation design; informed timeline, evaluation capacity building activities, and communication plan</p>	<p>Serve on Asthma Data and Evaluation Workgroup; Serve on Individual Evaluation Planning Team</p>
<p>Francis Annor, MPH PhD GACP Matrix Team (Until June 2015)</p>	<p><i>Director of Interoperability/Alzheimer's Disease Epidemiologist,</i> Georgia Department of Public Health</p>	<p>Public Health Surveillance</p>	<p>Developed program description, prioritization criteria and ranked the evaluation candidates; Developed preliminary evaluation design; informed timeline, evaluation capacity building activities, and communication plan</p>	<p>Consultant to Individual Evaluation Planning Team</p>
<p>Regina Lunde Strategic Evaluation Planning Team</p>	<p>Director, Pulmonary Services, Children's Healthcare of Atlanta</p>	<p>Pulmonary, Healthcare Systems</p>	<p>Developed program description, prioritization criteria and ranked the evaluation candidates; Developed preliminary evaluation design; informed timeline, evaluation capacity building activities, and communication plan</p>	<p>Consultant to Asthma Data and Evaluation Workgroup, Individual Evaluation Planning Team</p>
<p>Sadie Stockton Strategic Evaluation Planning Team</p>	<p>Chronic Disease Prevention Program Coordinator , Georgia Department of Public Health</p>		<p>Developed program description, prioritization criteria and ranked the evaluation candidates; Developed preliminary evaluation design; informed timeline, evaluation capacity building activities, and communication plan</p>	<p>Serve on Asthma Data and Evaluation Workgroup; Serve on individual evaluation planning team; Implement prioritized evaluation</p>

<p>Tim Callahan</p> <p>Strategic Evaluation Planning Team</p>	<p>Evaluation & Support Programs Director, Environmental Health Section, Georgia Department of Public Health</p>	<p>Public Health (Environmental Health); Evaluation</p>	<p>Developed program description, prioritization criteria and ranked the evaluation candidates; Developed preliminary evaluation design; informed timeline, evaluation capacity building activities, and communication plan</p>	<p>Serve on Asthma Data and Evaluation Workgroup; Serve on Individual Evaluation Planning Team</p>
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Georgia Asthma Control Program (GACP): Comprehensive Asthma Control Through Evidence-based Strategies and Public Health—Health Care Collaboration [CDC- 2U59EH000520-07]

Activity	Surveillance
Purpose	To increase the use of asthma surveillance data by partners for planning, implementation and evaluation of interventions by stakeholders and partners.
Description	<p>Maintain and enhance statewide surveillance system</p> <ul style="list-style-type: none"> • Design standardized and secure data collection method and reporting platform for the Cross-DPH Multicomponent, Multi-Trigger Intervention for Asthma client data • Determine the usability of Medicaid, EMS, and health systems data, such as quality measures and health outcomes to use for program planning and evaluation • Conduct a webinar training and develop a reference guide describing how to use the Online Analytical Statistical information System (OASIS) and the types of data available from the system • Develop and implement a web query to examine access to and utilization of surveillance resources available on GACP website <p>Monitor and use data to guide strategic action</p> <ul style="list-style-type: none"> • Identify data gaps and potential new sources of data • Provide surveillance data to stakeholders and partners in order to assist in guiding statewide intervention strategies • Respond to data request from internal and external stakeholders • Create maps and charts to demonstrate the alignment of program activities and asthma burden • Publish and disseminate surveillance products
Key Partners	State Agency Partners, Georgia Asthma Advisory Board, Georgia Asthma Coalition
Intended Outcomes	<ul style="list-style-type: none"> • Increased production of surveillance products for the public on asthma • Increased use of asthma surveillance data by partners for planning, implementation and evaluation of interventions • Increase the utilization of statewide surveillance system to access asthma data



Georgia Asthma Control Program (GACP): Comprehensive Asthma Control Through Evidence-based Strategies and Public Health—Health Care Collaboration [CDC- 2U59EH000520-07]

Activity	Cross-DPH Multicomponent/Multi-Trigger Intervention for Asthma
Purpose	To provide self-management education, case management services, and asthma health homes assessment to children (0-17 years of age) with a diagnosis of not well-controlled or very poorly controlled asthma dually enrolled in Medicaid and DPH’s Maternal and Child Health Children’s Medical Services (CMS) Program.
Description	<p><u>GACP and Georgia Healthy Homes Program</u> will provide:</p> <ul style="list-style-type: none"> • Healthy Homes Essentials training course to increase district capacity and number of certified healthy homes specialist • Becoming an Asthma Educator and Care Manager training course to increase district capacity among District Health Promotion Coordinators, CMS nurses and partners to deliver asthma self-management education to children with asthma and their families <p><u>DPH District CMS Nurse/Trained Asthma Educator</u> will provide -</p> <ul style="list-style-type: none"> • Self-management education for children with asthma and their caregivers • Asthma care coordination with primary care providers, specialty providers, Healthy Homes specialist, and schools <p><u>District Environmental Health-Healthy Homes Specialist</u> will provide –</p> <ul style="list-style-type: none"> • Healthy Homes education for caregivers • In-home trigger reduction activities <ul style="list-style-type: none"> ○ Healthy Homes assessment and recommendations ○ May include provision of mattress/pillow case covers, HVAC filters, pest baits, etc.
Key Partners	DPH Maternal and Child Health Section Children’s Medical Services, DPH Environmental Health – Healthy Homes Program, Public Health Districts, Local Provider Practices, Community Partners
Intended Outcomes	<ul style="list-style-type: none"> • Increased access to guidelines-based care for asthma <ul style="list-style-type: none"> ○ Better access to comprehensive asthma control services ○ Public health and health care coordination on asthma ○ Adoption of evidence-based practices and supportive policies ○ Improved quality of asthma care ○ Linkage to guidelines-based and community care for people with asthma • Decreased burden and disparities in asthma care and management and health outcomes <ul style="list-style-type: none"> ○ Increased quality of life for people with asthma ○ Emergency room visits and hospitalization rates ○ Number of school and work days missed ○ Asthma activity limitations ○ Asthma deaths

Georgia Asthma Control Program (GACP): Comprehensive Asthma Control Through Evidence-based Strategies and Public Health—Health Care Collaboration [CDC- 2U59EH000520-07]

Intervention	Georgia Asthma-Friendly School Policy & Best Practices
Purpose	To promote the awareness, adoption, implementation, and enforcement of comprehensive Asthma-Friendly School Policies among K-12 schools and school districts in Georgia.
Description	<p><u>GACP</u> will provide :</p> <ul style="list-style-type: none"> • “Train-the-Trainer” courses in: Becoming An Asthma Educator and Care Manager, Georgia’s Asthma-Friendly Schools Policies, and EPA’s Tools for Schools Indoor Air Quality (IAQ) training • Technical assistance and training resources to aid in policy adoption, implementation, and enforcement • Administer Georgia’s Asthma-Friendly School Recognition <p><u>District Health Promotion Coordinators/Community Partners</u> will:</p> <ul style="list-style-type: none"> • Conduct asthma school policy assessments • Prioritize work in schools/school districts with a high burden of asthma • Promote the awareness of asthma friendly school policies and best practices through the use of multiple communication channels • Promote the adoption of asthma-friendly school policies and best practices by working with school health councils/teams (including youth and adult advocates) • Provide technical assistance/training to school personnel
Key Partners	Public Health Districts, Georgia Association of School Nurses, Georgia Department of Education, Local School Districts, Community Partners, Parent Teacher Associations, Environmental Protection Agency - Region 4
Intended Outcomes	<ul style="list-style-type: none"> • Increased linkages to guidelines-based care for people with asthma • Increase number of schools in targeted public health districts that adopt and implement asthma-friendly school policies • Increase proportions of schools that are in compliance with Senate Bill 472 that allow children to possess and self-administer asthma medication • Increase number of targeted schools/districts engaged in activities or actions that support implementation of asthma friendly school policies and best practices • Increase the number of schools receiving Georgia’s Asthma-Friendly School Recognition

Georgia Asthma Control Program (GACP): Comprehensive Asthma Control Through Evidence-based Strategies and Public Health—Health Care Collaboration [CDC- 2U59EH000520-07]

Intervention	Georgia Asthma Management Education in Child Care Settings (GAME-CS)
Purpose	Using the GAME-CS curriculum, promote the awareness, adoption, and implementation of asthma-friendly policies in Georgia’s childcare settings by training childcare centers to appropriately respond to asthma emergencies, recognize signs and symptoms of asthma, maintain asthma-friendly environments, and link families to guidelines-based care.
Description	<p><u>GACP</u> will provide:</p> <ul style="list-style-type: none"> • Technical assistance and materials to implement GAME-CS “Train-the-trainer” courses for District Health Promotion Coordinators, Community Partners, and Georgia Head Start Association Training Coordinators • Technical assistance and resources to aid in policy adoption and implementation • Maintain entity status with the Georgia Department of Early Care and Learning (DECAL) for the provision of Early Childhood Education (ECE) credits for childcare staff who participate in GAME-CS courses • Administer Georgia’s Asthma –Friendly Childcare Center Recognition <p><u>District Health Promotion Coordinators & Community Partners</u> will provide:</p> <ul style="list-style-type: none"> • GAME-CS curriculum training to child care centers • Increased capacity to deliver GAME-CS training by identifying trainers throughout the public health districts • Increased awareness of GAME-CS curriculum • Increased awareness of Georgia’s Asthma-Friendly Childcare Center Recognition • Technical assistance to child care centers to implement Asthma-friendly policies and systems changes <p><u>Georgia Head Start Association</u> will:</p> <ul style="list-style-type: none"> • Identify and train individuals in head start agencies to complete the GAME-CS “train-the-trainer” courses and facilitate training opportunities in their local service area • Promote the awareness of GAME-CS curriculum and Georgia’s Asthma-Friendly Childcare Center recognition through the use of multiple communication channels
Key Partners	Georgia Head Start Association, Public Health Districts, Child Care & Head Start Centers, DECAL, Community Partners, Georgia Regents University – Department of Respiratory Therapy, EPA-Region 4, Department of Health & Human Services – Administration of Children & Families
Intended Outcomes	<ul style="list-style-type: none"> • Increased linkages to guidelines-based care for people with asthma. • Increased number of child care settings adopting asthma-friendly policies • Decrease emergency room visits among children ages 0-4 • Increased number of child care setting receiving Georgia’s Asthma-Friendly Child Care Recognition

Georgia Asthma Control Program (GACP): Comprehensive Asthma Control Through Evidence-based Strategies and Public Health—Health Care Collaboration [CDC- 2U59EH000520-07]

Intervention	Asthma Practice Improvement
Purpose	To increase provider knowledge and use of evidenced-based practices for asthma diagnosis, treatment and management according to the National Asthma Education and Prevention Program (NAEPP) Expert Report – 3 (EPR–3) guidelines.
Description	GACP via contracted services provides free CME-based practice improvement courses within Georgia’s high-burdened health districts. Courses are available to care teams in private practices, community health, and public health department settings. The intervention components include: <ol style="list-style-type: none"> 1) Physician and staff education in the NAEPP EPR-3 guidelines and spirometry administration and interpretation 2) Practice system redesign to support optimal asthma care 3) Decision support to ensure appropriate implementation of key clinical activities
Key Partners	Not One More Life, Pediatric Healthcare Improvement Coalition, Children’s Healthcare of Atlanta, Public Health Districts, Choice Healthcare Network, Local Provider Practices
Intended Outcomes	<ul style="list-style-type: none"> • Increasing the number of asthma action plans completed by providers • Increase the prescription ratio of controller medications to relievers by 3:1 • Increase the number of primary care settings using spirometry for the diagnosis and monitoring of asthma • Increase the number of children receiving seasonal influenza vaccination

Georgia Asthma Control Program (GACP): Comprehensive Asthma Control Through Evidence-based Strategies and Public Health—Health Care Collaboration [CDC- 2U59EH000520-07]

Intervention	Health System Innovations for Asthma in Community Health Settings
Purpose	To increase the provider knowledge and use of National Asthma Education and Prevention Program (NAEPP) EPR-3 guidelines in FQHCs and IPAs; promote adoption of team-based approach to asthma care; and explore innovative approaches to care coverage using the shared medical savings model.
Description	<p>Georgia Asthma Control Program will collaborate with Federally Qualified Health Centers (FQHCs), Independent Practice Associations (IPAs) and safety net providers to:</p> <ul style="list-style-type: none"> • Promote the adoption of evidence-based strategies in community settings for comprehensive asthma care management • Promote innovation in payment and service delivery models • Work with partners to train and supervise care navigators to conduct intensive asthma self-management education, home-based asthma trigger education and referral for other services as needed • Improve quality of care through decision support, electronic health record optimization and clinic systems redesign <p>Collaborating health settings will develop and implement mechanisms to share information/feedback between persons/organizations providing asthma education and health care providers.</p>
Key Partners	Choice Healthcare Network, Southside Medical Center, Morehouse Healthcare, Georgia Family Health Centers, Four Corners Primary Care Center, Not One More Life
Intended Outcomes	<ul style="list-style-type: none"> • Increased linkages to guidelines-based care for people with asthma. • Increase adherence to asthma-related NCQA (HEDIS) Guidelines • Increasing the number of asthma action plans completed by providers • Increase the prescription ratio of controller medications to relievers by 3:1 • Increase the number of primary care setting using spirometry for the diagnosis of asthma • Increase the number of children receiving seasonal influenza vaccination

GACP Evaluation Prioritization Survey
Administration Mode: Web-Based (Qualtrics)

I. Introduction (Attachments: GACP Logic Model, GACP Activity Profiles, Strategic Plan For Addressing Asthma in Georgia)

The Georgia Asthma Control Program (GACP) has been funded by the Centers for Disease Control and Prevention (CDC) National Asthma Control Program (NACP) since 2001, and in 2014 received a new five-year cooperative agreement to **maximize the reach, impact, efficiency, and sustainability of comprehensive asthma control services.**

Guided by its mission, and in alignment with national program goals, the GACP has outlined goals, objectives, and activities to promote the provision of comprehensive services:

Infrastructure Strategies	To support leadership, strategic partnerships, strategic communications, surveillance, and evaluation
Services Strategies	To expand school and home-based services
Health Systems Strategies	To improve coverage, delivery, quality, and use of clinical services.

The purpose of this survey is to prioritize the Georgia Asthma Control Programs activities for evaluation planning purposes. Prioritizing activities allows the asthma program to direct resources to those activities that are deemed most critical to evaluate.

The results of the survey will inform GACP's strategic evaluation plan. A strategic evaluation plan lays out the sequence, rationale, general content, scope of the evaluations that will take place during the cooperative agreement funding cycle.

During this survey, you will be asked to respond to two exercises –

- 1. Rank the prioritization criteria in order of importance for prioritizing evaluation activities**
- 2. Rank the potential evaluation activities in each strategy area (Infrastructure, Service, Health System) against each criteria.** This will yield a "raw rank" score for each evaluation activity.

To generate a rank-ordered list of priority evaluation candidates, the importance assigned each criteria will be summarized, translated in weights and applied to the "raw rank" score of the evaluation candidates. Evaluation candidates with the highest weighted score are considered highest priority for evaluation



GACP Evaluation Prioritization Survey
Administration Mode: Web-Based (Qualtrics)

1. Please fill out your name and contact information below.

First Name	
Last Name	
Title	
Affiliation	
Email Address	
Phone Number	

2. Criteria Ranking

(Attachments: GACP Logic Model, GACP Activity Profiles)

Rank the criteria in order of importance for prioritizing activities for evaluation from 1 (lowest importance) to 8 (highest importance). The results of this exercise will be summarized, translated in weights and applied to the "raw rank" score of the evaluation activity.

- _____ **Plan Alignment** How closely aligned is this activity with our state asthma plan?
- _____ **Focus** Does this activity affect those most burdened by asthma?
- _____ **Reach** Will this activity reach a substantial amount of individuals most burdened by asthma?
- _____ **Disparities** Will this activity reduce asthma disparities?
- _____ **Information Need** How useful is this activity for making near-term decisions?
- _____ **Improvements** Would this activity likely result in recommendations for programmatic improvements?
- _____ **Use** Is it likely that the intended audience will use results or recommendations from this activity?
- _____ **Sustainability** How much does this activity contribute to the sustainability of the state asthma program?

3. Activity Prioritization Matrix

The Georgia Asthma Control Program (GACP) has entered into a new five-year cooperative agreement with the CDC National Asthma Control Plan to maximize the reach, impact, efficiency, and sustainability of comprehensive asthma control services. GACP's proposed activities in the three strategy areas (Infrastructure Strategies, Service Strategies, and Health System Strategies) will be presented in a set of matrices.

On a scale of 1 - 3, rank the potential evaluation activity against each criterion.

1 = Tactical: This activity is a functional enhancement; evaluation of this activity is not required but should be conducted if resources permit

2 = Strategic Alignment: This activity supports programmatic goals; evaluation of this activity is required eventually but could wait until later if necessary

3 = Mission Critical: This activity is mission critical activity; evaluation of this activity is essential for achieving programmatic goals.

This exercise will yield a "raw rank" score for each evaluation activities. To generate a rank-ordered list of priority evaluation activity, the importance assigned each criteria will be summarized, translated in weights and applied to the "raw rank" score of the activity.

Health Systems Strategies

Coordinate with health care organizations to improve coverage, delivery, & use of clinical & other services

	Plan Alignment How closely aligned is this activity with our state asthma plan?	Focus Does this activity affect those most burdened by asthma?	Reach Will this activity reach a substantial amount of individuals most burdened by asthma?	Disparities Will this activity reduce asthma disparities?	Information Need How useful is this activity for making near-term decisions?	Improvements Would this activity likely result in recommendations for programmatic improvements?	Use Is it likely that the intended audience will use results or recommendations from this activity?
Health System Strategy: Asthma Practice Improvement							
Health System Strategy: Health System Innovations for Asthma in Community Health Settings							

Service Strategies

Expand access to comprehensive asthma control services through home-based and/or school-based strategies

	Plan Alignment How closely aligned is this activity with our state asthma plan?	Focus Does this activity affect those most burdened by asthma?	Reach Will this activity reach a substantial amount of individuals most burdened by asthma?	Disparities Will this activity reduce asthma disparities?	Information Need How useful is this activity for making near-term decisions?	Improvements Would this activity likely result in recommendations for programmatic improvements?	Use Is it likely that the intended audience will use results or recommendations from this activity?
Service Strategy: Cross-DPH Multicomponent, Multi-Trigger Intervention for Asthma							
Service Strategy: Georgia Asthma-Friendly School Policy & Best Practices							
Service Strategy: Georgia Asthma Management Education in Child Care Settings (GAME-CS)							

Infrastructure Strategies

Support leadership, strategic partnerships, strategic communications, surveillance, and evaluation

	Plan Alignment How closely aligned is this activity with our state asthma plan?	Focus Does this activity affect those most burdened by asthma?	Reach Will this activity reach a substantial amount of individuals most burdened by asthma?	Disparities Will this activity reduce asthma disparities?	Information Need How useful is this activity for making near-term decisions?	Improvements Would this activity likely result in recommendations for programmatic improvements?	Use Is it likely that the intended audience will use results or recommendations from this activity?
Infrastructure Strategy: Georgia Asthma Control Program Leadership & Administration							
Infrastructure Strategy: Strategic Partnerships							
Infrastructure Strategy: Strategic Communications							

4. Please share your suggestions, comments and feedback on the prioritization survey.

Thank you for participating in the survey!