**SMART Aim:**
Reduce the # of ED visits/100 child-years for children managed for persistent asthma from A to B by 12/31/2021.

**Global Aim:**
Improve care for children with asthma by understanding systems issues and creating partnerships between healthcare providers, improvement partners health plans and public health agencies.

**Care is Evidence-Based**
- Primary care providers deliver evidence-based care according to National, Heart, Lung, and Blood Institute Asthma guidelines and current evidence.
- Data systems provide feedback to healthcare providers regarding performance.

**Patients and Family Needs are Met**
- Patients have affordable access to primary care.
- Social Determinants of Health are recognized and addressed.
- Parents and caregivers understand the acute management of asthma.
- Environmental factors are identified and reduced.
- Specialists partner with medical homes.

**Healthcare System Supports Improvement**
- Healthcare system is equipped with a structure and capacity to engage in quality improvement work.
- Electronic record can provide clinical decision support.
- Data from electronic health records can generate necessary reports.
- Quality measures are clearly articulated to health plans and healthcare providers.

**Secondary Drivers**
- Patients have affordable access to primary care.
- Social Determinants of Health are recognized and addressed.
- Parents and caregivers understand the acute management of asthma.
- Environmental factors are identified and reduced.
- Specialists partner with medical homes.

**Examples of Interventions**
- Increase the number of children with asthma severity accurately classified.
- Increase assessment of asthma control at well-child checks.
- Increase prescription of appropriate controller medications.
- Increase identification of asthma triggers.
- Increase asthma education.
- Decrease cost of medications/devices.
- Increase care coordination services.
- Increase sharing of pediatric asthma action plans with the family and community providers (schools, early child education centers).
- Increase identification and remediation of asthma triggers in the home.
- Develop care pathways with medical homes and specialists.
- Support quality improvement efforts in the healthcare system and public health.
- Clinical decision-making tools capture process measures and collect timely data.
- Communication is effective and reliable between emergency department and medical home.