

# Primary Care Asthma Program Annual Best Practice Checklist

## PCAP Best Practice Standard

\* 1. Name:

\* 2. Site name:

\* 3. Health Care Providers (HCPs) have an understanding of the PCAP generic program standards consistent with their distinct roles and responsibilities

b. There will be an identified plan for training and communication to all HCPs involved in PCAP.

- Meets Standard
- Does Not Meet Standard

Site Comments

\* 4. The PCAP site follows the current Lung Association (TLA) Asthma Care Map for patient assessment and follow-up

- Meets Standard
- Does Not Meet Standard

Site Comments

\* 5. The PCAP site follows the current TLA COPD Care Map for patient assessment and follow-up

- Meets Standard
- Does Not Meet Standard

Site Comments

\* 6. PCAP educator and/or lead is in good standing with their college or governing body

- Meets Standard
- Does Not Meet Standard

Site Comments

\* 7. PCAP educator and/or lead to provide college registration #

College registration #

Site Comments

\* 8. PCAP educator and/or lead is a Certified Respiratory Educator (CRE) or Certified Asthma Educator (CAE)

- Meets Standard
- Does Not Meet Standard

Site Comments

\* 9. Each PCAP site must adhere to the PCAP Spirometry Policy and Procedure in the Spirometry Manual\*

\*If spirometry is not performed on site, this may not apply. However, the spirometry that is conducted off site should adhere to ATS/ERS/CTS guidelines.

- Meets Standard
- Does Not Meet Standard
- N/A

Site Comments

\* 10. PCAP site has a medical directive in place for conducting pre and post bronchodilator spirometry, including Salbutamol administration\*

\*If spirometry is not performed on site, this may not apply. However, the spirometry that is conducted off site should adhere to ATS/ERS/CTS guidelines.

- Meets Standard
- Does Not Meet Standard
- N/A

Site Comments

\* 11. The PCAP site uses the PCAP Operators Checklist when conducting spirometry\*

\*If spirometry is not performed on site, this may not apply. However, the spirometry that is conducted off site should adhere to ATS/ERS/CTS guidelines.

- Meets Standard
- Does Not Meet Standard
- N/A

Site Comments

\* 12. For children < 6 years of age who are unable to perform spirometry for diagnosis, Canadian Thoracic Society (CTS) Preschool Asthma Guidelines are followed

- Meets Standard
- Does Not Meet Standard

Site Comments

\* 13. If spirometry is inconclusive for diagnosis, alternative methods should be considered (e.g., methacholine challenge, Peak Expiratory Flows (PEF), exercise testing\*\*, etc.)

\*\*exercise testing: to evaluate exercise-induced bronchospasm (EIB). This is not a cardiac stress test.

- Meets Standard
- Does Not Meet Standard

Site Comments

## Primary Care Asthma Program Annual Best Practice Checklist

\* 14. Identification of Physician and/or Nurse Practitioner (NP) responsible for the interpretation of spirometry and the communication of the diagnosis to the client

Yes

No

Site Comments

\* 15. Spirometry is conducted by a Registered Respiratory Therapist (RRT), Registered Cardiopulmonary Technologist or another regulated health professional who has successfully completed an accredited spirometry course such as SpiroTrec™

Meets Standard

Does Not Meet Standard

Site Comments

\* 16. Spirometry is interpreted by qualified individuals within their scope of practice according to ATS/ERS/CTS standards

Meets Standard

Does Not Meet Standard

Site Comments

\* 17. The assessment for both asthma and COPD should include the explicit ruling out of alternative diagnosis

Meets Standard

Does Not Meet Standard

Site Comments

\* 18. All asthma and COPD clients, together with their families/caregivers (if desired) are active partners in the management of their disease

- Meets Standard
- Does Not Meet Standard

Site Comments

\* 19. All clients have a written or electronic action plan to be reviewed/revised at each appointment.

- Meets Standard
- Does Not Meet Standard

Site Comments

\* 20. There is an established plan and pathway for follow-up with every client

- Meets Standard
- Does Not Meet Standard

Site Comments

\* 21. The HCP explores barriers to adherence at every visit

- Meets Standard
- Does Not Meet Standard

Site Comments

\* 22. Asthma and COPD teaching resources and tools provided to the client and family will be evidence-based and consistent with the current CTS guidelines.

- Meets Standard
- Does Not Meet Standard

Site Comments

\* 23. List all PCAP resources you currently use to aid in your clinical decision making

PCAP resources

Site Comments

\* 24. The type/model of Spirometer used:

Type/model of Spirometer

Predicted values used:

Site Comments

\*If spirometry is not performed on site, this may not apply. However, the spirometry that is conducted off site should adhere to ATS/ERS/CTS guidelines.

Please visit [www.lungontario.ca/PCAP](http://www.lungontario.ca/PCAP) for all PCAP resources

\* 25. PCAP needs assessment survey completed

Yes

No

\* 26. The PCAP site lead keeps the team engaged and celebrates successes (regular updates to ED, physician lead, program manager)

Yes

No

27. PCAP team members:

Physician lead:

Executive

Director/Program

Manager/site lead:

PCAP educator lead:

IT specialist:

Other:

28. Reviewed by:

PCAP site lead:

PCAP educator lead:

PCAP physician lead:

\* 29. Date signed:

Date / Time