

Diagnosis, Management and Patient/Family Support Logic Model

GOAL: NH residents with COPD have an improved sense of well being through correct diagnosis, access to appropriate treatment, and patient/family resources and support

Possible Activities	Short Term Outcomes (1-2 years)	Intermediate Outcomes (3-4 years)	Long Term Outcomes (5-6 years)
 Develop tools to promote and encourage use of Guidelines among medical providers Disseminate tool to providers Explore ways to integrate and encourage use of tool (pay-for-performance, etc.) 	Increased number of providers receiving Guidelines Tool and COPD Action Plans	Increased number of providers using COPD Action Plans Increased medical provider adherence to guidelines	
Pilot test NH COPD Action Plan and Guidelines tool		More people diagnosed with COPD	Increased referrals to pulmonary rehabilitation
Work with patient groups and Breathe NH's Lung Health Team members to identify and promote opportunities for patients and caregivers to interact with and provide education and support to each other Disseminate COPD best practices clinical research to	Increased patient and caregiver access to resources and support services	Increased patient disease self-management	Reduction in the number of preventable COPD-related readmissions
patients and caregivers			