## A.L.L. Study - Weekly Site Coordinator Feedback Log

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<th>Date:</th>
<th>Name:</th>
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Please include anything you think might help us understand barriers and facilitators to OCHIN A.L.L. implementation.

### Reminders:
- Goal is to reveal the stories and ongoing process of implementation.
- Please be specific and include details (how, who, what, & when) whenever possible.
- Note the feedback source (i.e., nurse, doctor, MA, patient, etc.)
- Use square brackets when sharing your insights or interpretations.
- Use quotation marks for verbatim quotes.

### Potential topics for your feedback log:

- ✓ Implementation (Day-to-day logistics) ✓ Surprises, Challenges, and Solutions
- ✓ Communication (Formal and Informal) ✓ Unresolved or ongoing issues
- ✓ Tools (BPA, Inreach and Outreach Solutions rosters, and education materials) ✓ Other feedback that you think is relevant