



California Chapter 1, American Academy of Pediatrics CEASE Training Evaluation Summary

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Background: In California, the American Academy of Pediatrics Chapter 1 has adopted the evidenced-based training program, *Clinical Effort Against Secondhand Smoke Exposure* (CEASE) and has developed and packaged CEASE for dissemination to pediatric practices in Northern CA. The CEASE California training incorporated the three main steps of CEASE: ask, assist, and connect. First, families are to be asked about their tobacco use and rules of smoking in and out of the household. Second, if the family member admits to using tobacco, the clinician provides brief motivational interviewing to assess their willingness to quit as well as to provide information about the consequences of second hand smoke exposure (SHSE) to their child's health. Third, if they are interested in quitting they are offered nicotine replacement therapy assistance and connected to the California Smokers' Helpline which provides additional smoking cessation support services. The California training included an initial meeting with an identified practice champion and a second meeting to train all clinic providers and staff.

Methods: Sites were recruited through the California Chapter 1 of the American Academy of Pediatrics and were selected based on their willingness to participate. There were three components to the CEASE - California implementation evaluation. (1) The training was evaluated using an anonymous, voluntary post-training assessment of participants' knowledge, attitudes and perceived ability to implement CEASE after participating in the training. (2) Clinician champions at each of the participating practice sites were interviewed to assess the extent how CEASE was being implemented at their practice site and to identify barriers and facilitators to implementation efforts. (3) Referrals to the CA Smokers' Helpline were captured as part of the Helpline's tracking system and provided to the evaluation team for analyses.

Results: A total of 24 practice sites participated in the training with a total of 279 staff being trained (146 doctors and 133 other clinicians and support staff).

Post training assessment: Training participants were first asked to rate how often they screen their patients for secondhand smoke exposure using a 4point Likert Rating Scale (4=Always; 3=Usually; 2=Sometimes; 1=Never). The average rating for screening practices was 2.96 indicating that participants usually screen pediatric patients prior to the training though there was a wide range (1-4) both across and within practice sites. Next, participants were asked to

report if they had ever heard of CEASE prior to the training. Most, 66.7% reported that they had never heard of CEASE prior to the training.

Participants were then asked to complete an anonymous survey after each of the trainings to evaluate the CEASE trainings in three main content areas: (1) Trainer Performance; (2) Ability to Support Professional Competence; and (3) Ability to Improve Knowledge and Practice. Participants were asked to use a 5-point Likert scale where 5=Excellent; 4=Above average; 3=Average; 2=Below Average; 1=Poor. The following tables provide the average ratings of the each of the CEASE training content areas.

TABLE 1: CEASE TRAINER PERFORMANCE	Average Rating on 5pt Likert Scale
Knowledge of the topic	4.93
Organization of material	4.87
Delivery of content	4.87
Ability to stimulate interest	4.84
Responsive to audience	4.88
Overall quality	4.92

TABLE 2: How Well Does The CEASE Training Support Your Professional Competence in the following areas	Average Rating on 5pt Likert Scale
Knowledge of the topic	4.70
Competence	4.65
Performance	4.63
Patient Care Outcomes	4.63
Meeting practice gaps/needs	4.77

TABLE 3: <i>This training improved....</i>	Average Rating on 5pt Likert Scale
my knowledge about the consequences of 2nd hand smoke	4.54
my understanding of the prevalence of tobacco use	4.48
how to use CEASE in my practice	4.74
my ability to screen patients for 2 nd hand smoke	4.52
my ability to refer patients to smokers' quit line	4.70
my ability to provide caregivers who smoke with a nicotine replacement therapy Rx	4.70

Interviews with provider champions: Interviewees report that implementing CEASE has been successful and share that most providers are consistently screening patients for SHSE and stated that the pre-completed NRT prescription forms and gold card referrals for the helpline were particularly helpful for smokers interested in quitting. It was also critical for support staff to be engaged as most practice sites screen for SHSE while they take the patient's vital signs. They also appreciated data from the Helpline being important for them to track their progress. Barriers included: limited time in the context of the full range of preventive health services that need to be addressed at the visit, insurance issues and cost-sharing for NRT prescriptions, and occasionally resistance from family members who do not want to talk about smoking cessation.

Helpline referral data: A total of 13 practice sites have incorporated the California Smoker's helpline referral process into their work flow. The remaining 11 practice sites are Kaiser Permanente sites which utilize their internal smoking cessation system (helpline, classes, etc). Of these 13 sites, the first two quarters of post-training data shows that implementation activities resulted in a total of 208 referrals to the Helpline and of those, the Helpline was able to reach 81 (39%) and of those reached 49 (60.5%) were counseled and 10 (12.3%) received smoking cessation support materials. A total of 20 (24.7%) individuals reached refused any support services. It was not possible to track nicotine replacement therapy prescriptions and the number of individuals who were successful in achieving their smoking cessation goals.

Conclusion: The AAP Chapter 1 CEASE California training is a practical, replicable, model for pediatric providers seeking support to help parents quit smoking. As California is embarking on further CEASE dissemination efforts it will be important to address implementation barriers and further evaluate the efficacy of this intervention. CEASE California successfully adopted and disseminated the evidence-based CEASE program. It includes some effective practice change strategies and support tools that are feasible and acceptable to implement in busy practice pediatric primary care settings.

Independent evaluation data shows that the trainings were highly successful with almost all participants rating each aspect of the training as "Excellent" or "Above Average". Ratings on the training's ability to improve knowledge and prevalence of secondhand smoke, while still high, were lower than other areas because many providers and clinic staff were already aware of these issues. Most participants reported that the training was particularly valuable in improving their ability to use CEASE in their practice. While many reported that they screened for second hand smoke exposure, many did not know what to do once they identified a positive exposure. Thus it is particularly important to note that the trainings were particularly valuable in improving both their ability to refer patients to the smokers' quit line and provide nicotine replacement therapy prescriptions.

First Five California has funded further expansion of the CEASE training to Southern California. To date 55 additional practice sites have been trained with 10 additional trainings that are scheduled. Interview data has been shared with the trainers and follow-up technical assistance to support CEASE implementation activities has been incorporated to the dissemination plan.