

Smoking Cessation Leadership Center/Pfizer IGLC

Congratulations on reaching the end of your Pfizer IGLC project! Please complete this final survey that is required for all grantees.

Please fill in the following information:

Name: Linda Sarna

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Organization: **UCLA School of Nursing**

Project Title: *Registered Nurses Referring to Quitlines: Helping Smokers Quit*

2. Select your category:

- Category 1: Single institutions and national organizations
- Category 2: Hospitals preparing for Joint Commission smoking cessation performance measures
- Category 3: State-wide efforts

3. What percentage of your project is complete?

- 0%
- 1–10%
- 11–20%
- 21–30%
- 31–40%
- 41–50%
- 51–60%
- 61–70%
- 71–80%
- 81–90%
- **91–100%**

4. What SCLC resources have been helpful? Select all that apply.

- **Connections with other grantees**
- **In-person meeting with technical assistance liaison**
- **Group phone calls**
- Phone calls with TA liaison
- Webinars
- Website resources
- Other, please specify:
-

5. Approximately how many people has your project impacted to date?

- 0
- 1–10
- 11–50
- 51–100
- 101–250
- **251–500**
- 501–1000
- 1001–2000
- Over 2000

6. How much organizational/systems change has your project created to date?

- 0%
- 1–20%
- 21–40%
- 41–60%
- 61–80%
- 81–100%
- N/A

- **7. Please answer the following three questions and submit as a Word file or PDF (2 pages max.) via Dropbox:**

- 1. What, if any, proposed activities were not completed? Briefly describe those activities, the reasons they were not completed and your plans for carrying them out.**

All proposed activities except data analyses and manuscript preparation (see *Detailed work plan from original submission at the end of this report*) have been completed.

Preliminary data analyses has been conducted and a more detailed analysis will be conducted prior to final manuscript preparation

Early drafts of manuscript preparation is currently underway.

- 2. Briefly tell us about any other unexpected issues, concerns or successes you have had during this reporting period.**

- a We had 396 valid surveys, less than the anticipated 800 from each of the 8 recruited hospitals, due to a number of reasons:*

- *The most common reason is commitments to other activities, busy schedules, and too many surveys.*
- *Those hospitals with a dedicated nurse champion supporting the project performed better than hospitals without a committed leader.*
- *In LA, we recruited 4 hospitals from the same health system and some CNOs were less enthusiastic about the program, having too many other responsibilities to fully promote the RNQL-HSQ project to their nurses.*
- *Each of the follow-up surveys saw some subject attrition: 286 at 3-months and 253 at 6-months.*

- b The 2 control hospitals were contaminated due to human error while using new REDCap survey program resulting in all 8 hospitals receiving reminders to view the project webcast intervention at 3-months instead of only the 6 experimental hospitals. As we had nurses individually login to the webcast, we are able to determine which nurses accessed the webcast and thus we still will be able to analyze the two groups separately.*

- 3. Is there anything else you want to tell SCLC or Pfizer?**

Based upon the results of this, and other studies, Dr. Stella Bialous has submitted a proposal titled “Increasing referral to the quitlines through statewide dissemination of an effective nurses education program for smoking cessation intervention in 4 states” for the September 3, 2014 Request for Proposals (RFP) on Smoking Cessation by the Pfizer Independent Grants for Learning and Change (IGLC) and the Smoking Cessation Leadership Center (SCLC) at the University of California, San Francisco. Participating

states were enthusiastic about the possibility of expanding the program statewide through the state nurses' associations. We presented a poster at the annual SRNT meeting and received a request to expand the program to NY state and were encouraged to work on a proposal that would follow up with patients.

Please also submit any products associated with your project, such as:

- **Summary data, including charts** (see tables following)
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- **Publications**
 - In preparation
- **Presentations**
 - SRNT Philadelphia poster (attached)
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- **Training materials** (*located on tobaccofreenurses.org website*)
 - **Printed Toolkit** of state-specific tobacco cessation materials
 - Trifold brochure (KY or LA)
 - AHRQ Pocket Guide, *'Helping Smokers Quit: A Guide for Clinicians'*
 - State (KY or LA) quitline card
 - **Website/webcast** of state-specific tobacco cessation materials
 - <http://www.tobaccofreenurses.org/projects>
 - <http://www.tobaccofreenurses.org/projects/rnql-hsq>
 - <http://www.tobaccofreenurses.org/projects/rnql-hsq/louisiana>
 - <http://www.tobaccofreenurses.org/projects/rnql-hsq/kentucky>
 - PowerPoint slides (KY & LA)
 - Fact Sheets (KY& LA)
- **Expanded and strengthened policies**
 -
- **Any other progress benchmarks**

Detailed Work Plan and Deliverables Schedule:

Activities (December 2012 to December 2014)	Complete	In process
Kentucky & Louisiana		
UCLA IRB approval	X	
Recruit & Randomize: 8 hospitals, 4 KY & 4 LA	X	
Consult with E. Hahn regarding KY hospitals & with B. Bourgeois about LA hospitals contacts	X	
Prepare invitational materials about study for consideration by Chief Nursing Officers (CNOs) at each hospital	X	
Send up to three email requests to CNOs inviting participation; if no response, select another eligible hospital	X	
Randomize selected hospitals using a random number generator so that each state has 3 experimental & 1 control hospital	X	
Identify & contact Nurse Champions from each hospital.	X	
Finalize Study Materials	X	
Confirm web-based survey evaluation materials with hospital & state-specific identifiers.	X	
Conduct phone interviews with CNOs/nurse champion re. project procedures & to obtain details about hospital tobacco control policies, existing tobacco dependence treatment resources & training.	X	
Adapt project materials (slides; nurse & tobacco statistics) from previous study, available resources, & information from LA & KY.	X	
Send educational materials to state consultants for review & changes, as appropriate	X	
Finalize tool kit of printed materials	X	
Finalize adaptation of slides/state: review & approval by K. Hudmon	X	
IRB: Assist with KY & LA hospitals' IRB procedures	X	
Website	X	
Hire a webmaster to assist with web-based distance learning, building project micro-site, and ongoing site maintenance.	X	
Prepare TFN website with a new, HSQ project microsite with project tabs for KY & LA specific materials	X	
Start production of webcast program & web materials: develop state-specific scripts, complete & upload recordings for KY & LA & test.	X	
Toolkits	X	
Send materials for tool kit for production; upload web-based materials on the project specific microsite	X	
Confirm procedures for continuing education credits at UCLA	X	
Send invitations to participate in the study to CNOs, nurse champions, with link to baseline survey for nurses in all hospitals in KY & LA	X	
Launch Baseline Survey in all 8 hospitals	X	
Send weekly reminder announcements to participate in the study over a three week period	X	
Send weekly reminders to nurse champion with statistics about level of enrollment	X	
Close baseline survey 1 month after initiation	X	
Toolkit of educational materials ready for distribution via mail to each of the hospitals & shipped after Baseline survey closed	X	
Confirm receipt & distribution of materials at each hospital	X	
Webcast/Web microsite resources made available: 6 Exp. Group Hospitals in KY & LA	X	
Launch 3-month Survey in KY & LA	X	
Send reminder emails to nurses participating in the study	X	
Send weekly reminders to nurse champion with statistics about level of enrollment	X	
Close 3-month survey in 1 month after initiation	X	

Activities (December 2012 to December 2014)	Complete	In process
Kentucky & Louisiana		
Launch 6-month survey	X	
Send weekly reminders to nurse champion with statistics about level of enrollment	X	
Close 6-month survey in 1 month after initiation	X	
Minimal intervention hospitals receive access to Webcast & Web microsite resources after 6-month survey completion	X	
Contact Hospital CNO's & arrange for distribution of incentives upon 6-mo. Survey closure	X	
Arrange for CEU certificates to be sent to qualifying nurse participants	X	
Ongoing activities	X	
Monthly Support calls with Nurse Champions in each hospital	X	
Ongoing communication with consultants E. Hahn (KY) & B. Bourgeois (LA) regarding hospitals and state tobacco control activities	X	
Begin web tracking after webcast/web materials link distributed	X	x
Data analysis & manuscript preparation		x
Data analysis 3-month survey , calculate response rate		x
Data analysis 6-month survey , calculate response rate		x
Manuscript preparation (in process)		x

Summary data

Table 1. RNQL-HSQ Summary of survey & webcast responses as of 11/06/14

ST	Hospital	WEB cast	BL Survey	3-mo svy		6-mo svy		CE certificates
			11/25/13 - 4/02/14	2/24 – 5/17/14		5/25/14 –10/01/14		7/25 – 10/09/14
		Viewed/ logged on	Resp.	Resp.	% BL	Resp.	% BL	
LA	Louisiana hospitals	85	164	107	62%	95	58%	53
KY	Kentucky Hospitals	153	232	162	70%	136	59%	79
Final TOTALS		239	396	269	68%	231	58%	132

Table 2. RNQL Demographics for nurses with at least one follow up N=283

	M	SD
Age	43.1	11.8
Years practiced as nurse	14.9	11.7
	N	%
Sex (female)	269	95
Ethnicity non-hispanic	279	99
Race		
White	255	90
Black	18	6

Asian	5	2
Other non-white	4	2
Smoking status:		
Never	200	71
Past	68	24
Present	14	5
Education:		
D/AA	104	37
BSN	161	57
MSN/PhD	17	6
Position :		
Oncology	16	6
Psych	9	3
Ob/GYN	10	4
Med/Surg/Rehab	168	60
Critical care/trauma	78	28
Family/friend experienced tobacco-related disease	207	73

Table 3. Paired improvement to consistent treatment on the 5As for nurses with baseline and 6-month data

	Baseline (%)	6 mo (%)	# stayed consistent	# became consistent	NcNemar
5As					
ask	205 (89%)	210 (91%)	195 (93%)	15 (7%)	0.42
advise	177 (77%)	202 (87%)	164 (81%)	38 (19%)	0.0006
assess	146 (63%)	177 (77%)	128 (72%)	49 (28%)	0.0002
assist	88 (38%)	112 (48%)	67 (60%)	45 (40%)	0.004
arrange	28 (12%)	39 (17%)	13 (33%)	26 (67%)	0.12
Refer quitline	22 (10%)	77 (33%)	16 (21%)	61 (79%)	<0.0001
Estimated number of patients counseled(>3)	41 (18%)	71 (31%)	20 (61%)	51 (39%)	0.0005
Estimated number of patients referred (>3)	12 (5%)	19 (8%)	0 (0%)	19 (100%)	0.28

Table 4. Cross-sectional tobacco cessation intervention (5As) outcomes for nurses with at least one follow up

	BL (N=283)		3 mo (N=269)		6 mo (N=231)	
	Always/Usually		Always/Usually		Always/Usually	
	n	%	n	%	n	%
5As						
ask	254	90	242	90	210	91
advise	220	78	232	86	202	87

assess	185	65	213	79	177	77
assist	113	40	135	50	112	48
arrange	35	12	55	21	39	17
Rec quitline	29	10	73	27	77	33
Refer	59	21	84	31	90	39
Rec Meds	89	31	116	43	112	48
Rev barriers	81	29	113	42	100	43
Rec smoke-free home env	137	48	170	63	150	65

Table 5. Number of patients counseled/referred for smoking cessation (past week) at baseline, 3- and 6-months.

		None	1-2	3-5	More than 5
		n (%)	n (%)	n (%)	n (%)
BL	Patients counseled past week	114 (40)	110 (39)	27 (10)	31 (11)
	Patients referred past week	223 (79)	41 (15)	12 (04)	6 (02)
3 mo	Patients counseled past week	87 (32)	110 (41)	43 (16)	26 (10)
	Patients referred past week	180 (67)	58 (22)	19 (7)	11 (04)
6 mo	Patients counseled past week	66 (29)	94 (41)	44 (19)	27 (12)
	Patients referred past week	147 (64)	65 (28)	12 (05)	7 (03)

Table 6. Nurses self-reported attitudes regarding tobacco cessation intervention with patients at baseline, 3- and 6-months

	BL	3 mo	6 mo
Please rate the extent to which you agree with the following statements	Agree/ Strongly agree	Agree/ Strongly agree	Agree/ Strongly agree
1. Asking patients about smoking increases the likelihood that they will quit.	88 (31)	106 (40)	89 (39)
2. It is difficult for me to get people to quit smoking.	195 (69)	163 (61)	136 (59)
3. Counseling patients about quitting is not an efficient use of my time.	25 (9)	18 (7)	18 (8)
4. Patients appreciate it when I provide advice about quitting smoking.	72 (26)	110 (41)	97 (42)
5. Discussing smoking cessation improves my relationship with patients.	72 (26)	97 (36)	88 (38)
6. I feel uncomfortable asking patients whether they smoke.	36 (13)	36 (14)	23 (10)
7. As a nurse, I can play an important role in helping patients quit.	220 (78)	218 (82)	177 (77)
8. I need more training to help patients quit smoking.	205 (73)	136 (51)	97 (42)
9. I have insufficient time to counsel patients about quitting smoking.	119 (42)	107 (40)	88 (38)
10. I should take a more active role in helping patients to quit smoking.	199 (71)	172 (65)	143 (62)
11. Patients will be offended if I inquire about their	36 (13)	25 (9)	15 (7)

smoking status.			
12. Providing tobacco cessation counseling is important to our hospital even if only a few patients quit.	248 (88)	237 (89)	203 (88)
13. I have an obligation to advise patients on the health risks associated with tobacco use	255 (90)	236 (89)	203 (88)

Table 7. Nurses self-assessment of their comfort with tobacco cessation counseling skills at baseline, 3- and 6-months

	BL	3 mo	6 mo
Please rate your level of counseling skills for each of the following:	Very good/ Excellent	Very good/ Excellent	Very good/ Excellent
1. Your overall ability to help patients quit using tobacco	21 (07)	40 (15)	25 (11)
2. Asking patients whether they use tobacco	208 (74)	197 (74)	172 (74)
3. Advising patients to quit tobacco	114 (40)	136 (51)	115 (50)
4. Assessing patients' readiness to quit tobacco	56 (20)	82 (31)	74 (32)
5. Assisting patients with quitting tobacco	28 (10)	50 (19)	38 (16)
6. Arranging follow-up counseling for tobacco	14 (05)	35 (13)	21 (09)

Table 8. Nurses prior experience with tobacco cessation intervention training (N = 283 at baseline)

	yes	
	n	%
Have you ever received training in tobacco/smoking cessation?	35	12
Have you received training in tobacco/smoking cessation within the past 24 months?	12	34
Have you heard about the 'Treating Tobacco Use and Dependence: 2008 Update.' Clinical Practice Guideline available from the Agency for Healthcare Research and Quality?	19	7
Are you familiar with the US Public Health Service pocket guide, 'Helping Smokers Quit: A Guide for Clinicians'?	39	14
Have you used the pocket guide, 'Helping Smokers Quit: A Guide for Clinicians' to help someone quit smoking?	12	31

Table 9. RNQL-HSQ tobacco cessation training intervention evaluation questions (N = 269 at 3-months)

	Yes
Have you viewed the RNQL-HSQ project educational Webcast on tobacco/smoking cessation within the past 3 months?	205 (76)
In the past 3 months, did you use the RNQL-HSQ website resources on smoking cessation?	72 (37)
In the past 3 months, did you receive a copy of the RNQL-HSQ Toolkit of printed materials (brochure, Quitline card, pocket guide, etc.)?	133 (50)
In the past three months, have you used the RNQL-HSQ toolkit of printed materials?	81 (30)
Have you viewed the RNQL-HSQ project educational Webcast on tobacco/smoking cessation	181 (78)

within the past 6 months?	
In the past six months, did you use the RNQL-HSQ website resources on smoking cessation?	73 (32)
In the past 6 months, did you receive a copy of the RNQL-HSQ Toolkit of printed materials (brochure, Quitline card, pocket guide, etc.)?	115 (50)
In the past three months, have you used the RNQL-HSQ toolkit of printed materials?	72 (31)