Inpatient Tobacco Cessation;

In December of 2012 the respiratory department received a Grant to educate clinicians on the Joint Commission's 4 recommendations for tobacco cessation treatment.

- 1. Screening for tobacco use on admission
- 2. Intervention during the hospital stay
 - Advise on the health hazards of tobacco
 - Provide /offerNicotine replacement
 - Provide/offer bedside counseling
- 3. Intervention at discharge
- 4. Follow-up after discharge

January 2013

Worked with the Education Department to create a Power Point educational program for Nursing and Non-nursing departments describing their role in tobacco cessation at STPH

February 2013

Worked with the IT department in developing reports to show our progress in following the Joint Commission Recommendations

March 2013

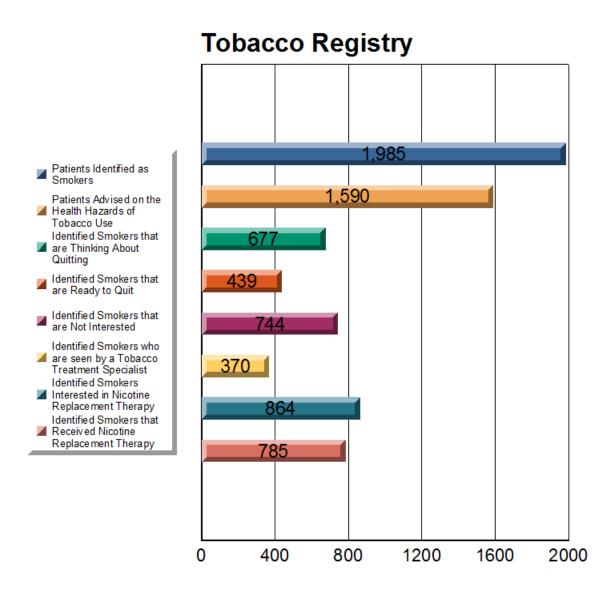
Sent two respiratory therapists to become Tobacco Treatment Specialists to assist with bedside counseling and our outpatient/community class Living Tobacco Free

May thru September 2013

Continued development of the inpatient and outpatient Living Tobacco Free Program

2 week quit percentage	51%
2 week reduced percentage	33%
NRT (nicotine replacement) Usage	73%

Inpatient 2 week follow-up after discharge

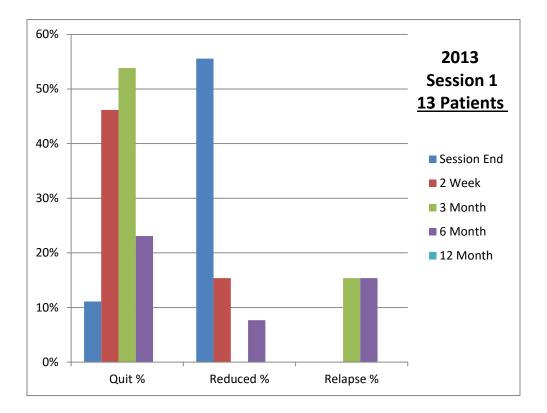


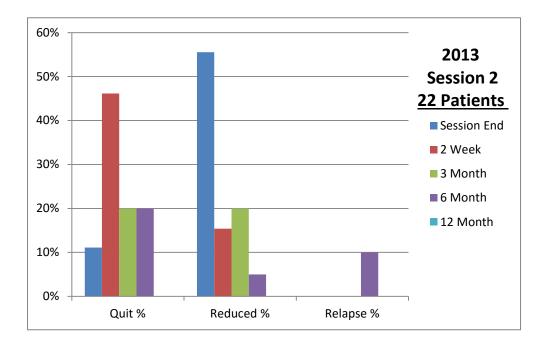
The above graph shows our inpatient tobacco cessation development from January 1st, 2013 through November 30th, 2013.

Summary of Outpatient Program - Living Tobacco Free

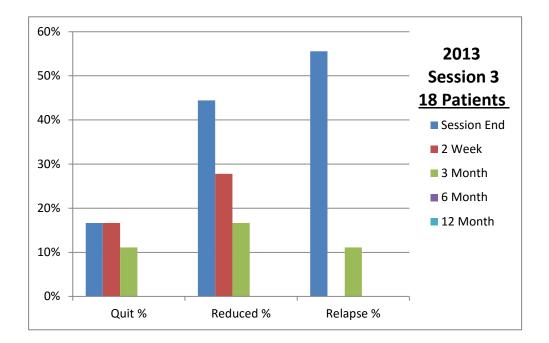
In 2013 we provided four nine week sessions, each session having 2 classes a week; one at lunch time and one evening class. We had a total of 75 participants with an attendance rate of 61%. The following graphs show; quit rate, reduced% and relapse over one year's time – sessions end, 2 weeks, 3months, 6months and 12 months.

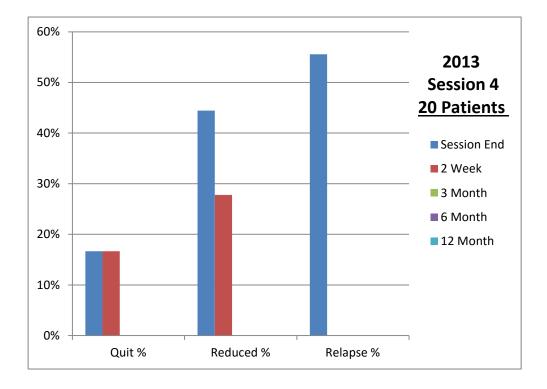
Tobacco Cessation Performance Improvement Project 2013





Tobacco Cessation Performance Improvement Project 2013





Tobacco Cessation Performance Improvement Project 2013

2014 goals

- 1. Continue educating and involving Nursing to assist with tobacco cessation and Nicotine replacement during hospitalization and at discharge.
- 2. Begin educating the Network physicians on their role in helping patients deal with tobacco dependence. Work along with them to initiate counseling on-site for their patients.
- 3. Increase outpatient community "Living Tobacco Free "classes to 5 sessions for a total of 10 classes.
- 4. Educate all health care professionals that tobacco use is the #1cause of death in the USA and tobacco cessation should be a Standard of Care for patients who abuse tobacco.