

EPACTT

EuroPean Accreditation Curriculum on Tobacco Treatment project

Final Report

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*European Network
for Smoking and Tobacco Prevention*

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EXECUTIVE SUMMARY

Background: Tobacco use remains one of the most preventable causes of death and disability worldwide. Smoking cessation and prevention strategies provide enormous potential for improving public health. However, it is particularly important that health professionals are trained in effective strategic approaches in order to help smokers to quit smoking.

Purpose: The EPACTT project aimed to create and mobilize a network of healthcare professionals, dedicated to advancing evidence-based tobacco dependence treatment and advocating for effective tobacco control policy in the Eastern European Region with a specific focus on clinicians and policy makers in Russia, Ukraine, Georgia, Armenia and Romania.

Approach: A double approach was used to address the aims of EPACTT-1. In the first approach a two days hands on, fully CME accredited educational intervention took place in Brussels in April 2016, over 216 attendees followed the hands on training, 44 of which were specifically recruited to participate from the 5 participating countries due to their relevance or high level policy capacity. A pre, post and two month follow up evaluation was performed. After the two month follow up a hands on training a pilot e-learning platform was launched to facilitate and further enhance continued training (www.elearning-ensp.org). In the second approach and so as to increase regional capacity and knowledge of policy makers and health care providers the ENSP guidelines for treating tobacco dependence were translated and adapted in Russian, Ukrainian, Georgian, Armenian and Romanian.

Results: The hands on training had an impact on the knowledge of the participant's knowledge of tobacco control and treating tobacco dependence. In a pre-post study design among the clinicians and policymakers in the training evaluation group (n=44), their knowledge increased around issues of what are the effective therapies in smoking cessation (Pre 2.7% vs. Post 68%, $p < 0.001$) knowledge of how much a typical craving lasts, (Pre 40.5% vs. Post 70.5%, $p = 0.007$), knowledge of the side effects of Varenicline (Pre 54% vs. Post 80%, $p = 0.017$). It is important to note that after the two day training 90% of participants stated that after the intervention that they have the required knowledge to help their patients ($p = 0.001$). A follow up two months after the completion of the course indicated that participants retained their knowledge even two months later, with a higher positive response rate to the majority of questions. The follow up indicated however that booster sessions are needed to ensure maintenance and long term sustainability.

Sustainability: The EPACTT-1 team and ENSP have established EPACTT-2, a Pfizer IGL&C to expand the activities and training of EPACTT among health care professionals and policymakers in the Southern, Central and Eastern European region and to further develop and finalise an online CME accredited eLearning platform for European clinicians and policy makers.

1. PROJECT PURPOSE

1.1 Overall Goal, Aims and Activities

The aim of the EPACTT Project was to increase the regional capacity of clinicians and policymakers in Eastern Europe in tobacco control and treating tobacco dependence, with a specific focus on Romania, Armenia, Georgia, Ukraine and Russia. The current project was part of the broader ENSP strategy to reduce tobacco consumption by developing common actions for organizations that are active in smoking prevention and tobacco control in Europe. Part of this strategy is the involvement of health professionals, who offer smoking cessation services in all European countries. The specific aims and activities undertaken as part of the EPACTT project are summarized below.

Aim 1: To develop an accredited tobacco treatment training program for healthcare professional in Eastern Europe

Activity 1.1: Develop a multidisciplinary faculty of experts on tobacco treatment, policy and advocacy.

Activity 1.2: Create a draft curriculum/training program (EPACTT) on tobacco treatment for healthcare professionals based on regional and international best practices.

Activity 1.3: Perform pilot testing, modifications and refinement of the EPACTT program.

Aim 2: To deliver the EPACTT accreditation program and enhance networking capacity so as to ensure Global Bridges Network expansion into Eastern Europe.

Activity 2.1: Deliver Phase 1 of the hybrid training program: hands on practical training.

Activity 2.2: Deliver Phase 2 of the hybrid training program: a pilot eLearning platform.

Activity 2.3: Perform examination and accreditation.

Activity 2.4: Perform program evaluation.

1.2 Background & Context

Smoking is one of the leading preventable causes of death. Over six million people per year, die prematurely because of a disease associated with smoking, of whom 700.00 are from Europe.¹ Although several countries have enforced smoking prevention strategies and bans to restrict smoking, millions of people still suffer from the effects of tobacco use and its impact on life expectancy and quality of life as well.² In light of this maelstrom it is important to note that approximately one out of two smokers have tried to quit smoking,^{3,4} while only a small percentage of those who manage to quit, will not relapse for a long time.⁵ despite the fact that smoking cessation increases life expectancy regardless of age.⁶

Smoking is regarded as a chronic relapsing condition and sometimes treatment is difficult and multifactorial.^{7,8} Several studies have indicated that pharmacotherapy, motivational interviewing and behavioral therapy all have a positive impact on smoking cessation outcomes.^{2,9,10} It has been proven that even a three-minute counseling, can contribute to the process of rehabilitation of the smoker. As for the decision about what treatment will be used each time, practitioners should consider initially the intention, the mobilization and the conformability of the smoker and then the degree of nicotine dependence, the likelihood of side effects, as well as the smokers personality.⁷

Overall, smoking cessation and prevention strategies provide enormous potential for improving public health. However, for its full potential to be realized it is particularly important that health care professionals and policy makers are trained in how to implement effective strategic approaches in order

to help smokers to quit smoking and at the same time, provide information and incentives to those who are not motivated yet.

2.0 THE EPACTT PROGRAM

2.1 Hands-on Training Program

2.1.1 The programme

The first aim of the project was to develop an accredited “hands on” tobacco treatment training program for healthcare professional in Eastern Europe. For this reason, a two day face to face smoking cessation seminar was held in Brussels, Belgium on the 5-6 April, Brussels, Belgium 2016 within the context of the ENSP annual tobacco control conference.

The training intervention focused on providing information on the tobacco epidemic in Europe, including factors that contribute in tobacco use, health effects of tobacco use, approaches to tobacco control and the role of health professionals on tobacco control and the pathophysiology of addiction to nicotine. The seminar also focused on providing specific guidelines and approaches to help participants deliver evidence-based treatment of tobacco in their clinics. Finally, the last section of the training contained information and hands on training on the use of CO monitors, for the establishment and operation of a smoking cessation center.

The intervention further involved key note presentations on tobacco control, case study presentations & hands on workshop on how to perform smoking cessation among high risk groups & hands on workshops on how to perform smoking cessation in clinical practice. The hands on training also focused on tobacco treatment and handling nicotine addiction, including cognitive and behavioral treatment within the form of workshops.

It is important to note that all participants also received a refurbished CO monitor (compliments of Bedfont) that they could take home to use in their clinical practice. All trainees also received a copy of the ENSP treating tobacco dependence guidelines (in their national language) as also consult and provider tools for use within clinical practice.

2.1.2 Accreditation

The training programme was fully accredited by the European Accreditation Council for Continuing Medical Education (EACCME) with 11 CME credits. EACCME®, is the official European accreditation body for continued Medical education (CME) with the overall aim of encouraging high standards in the development, delivery and harmonisation of CME in Europe. The official accreditation provided to EPACTT-1 is in Annex 1 and the EACCME Certificate provided in ANNEX 2.



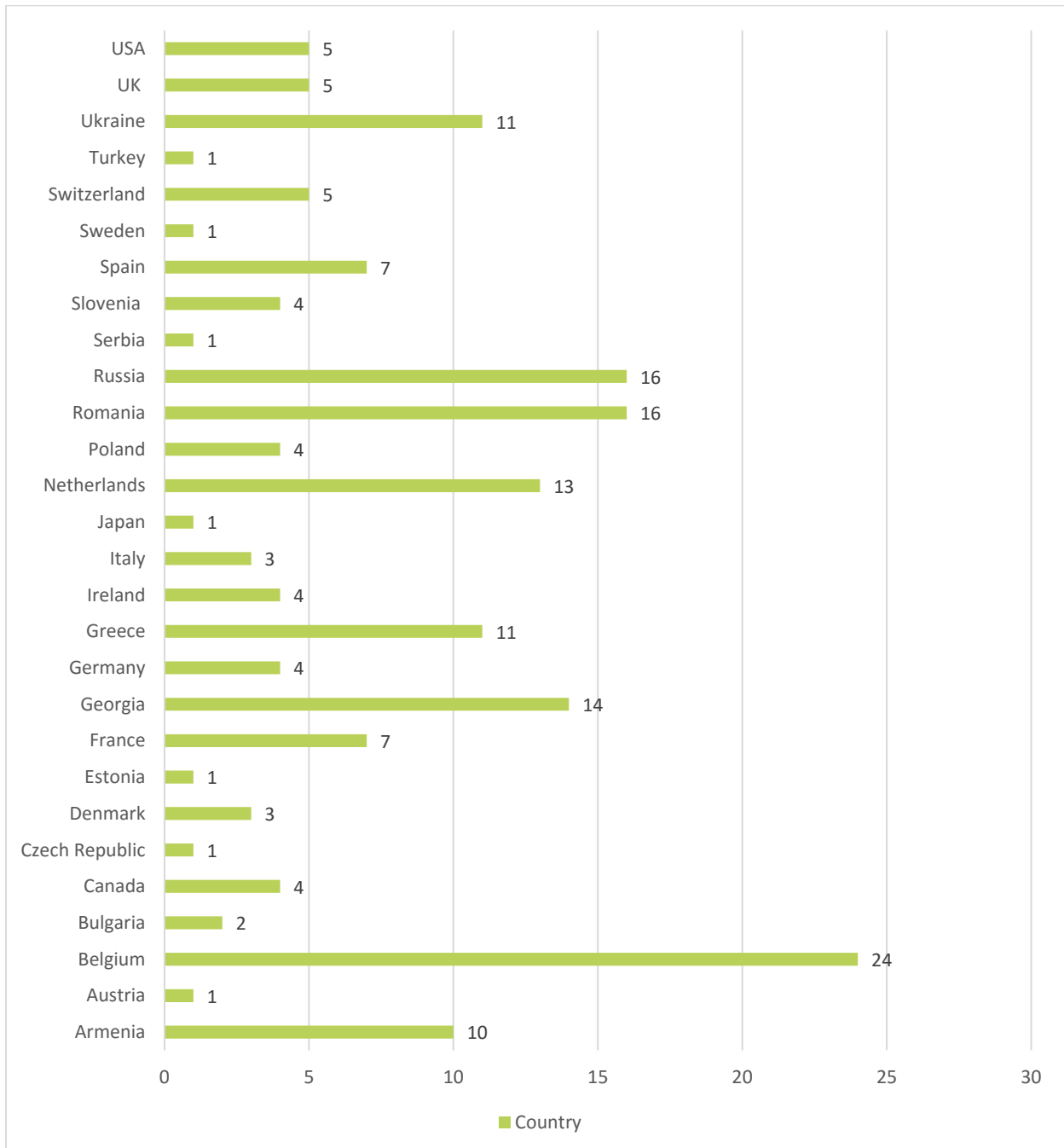


2.1.3 Participants of the training

The training program was designed not only for physicians, but for all health care professionals capable of delivering smoking cessation counseling such as: nurses, midwives, psychologists, social workers, pharmacists and other health care professionals who are able to help smokers quit smoking. Since the seminar was delivered in English, participants had to be able to read and comprehend English very well.

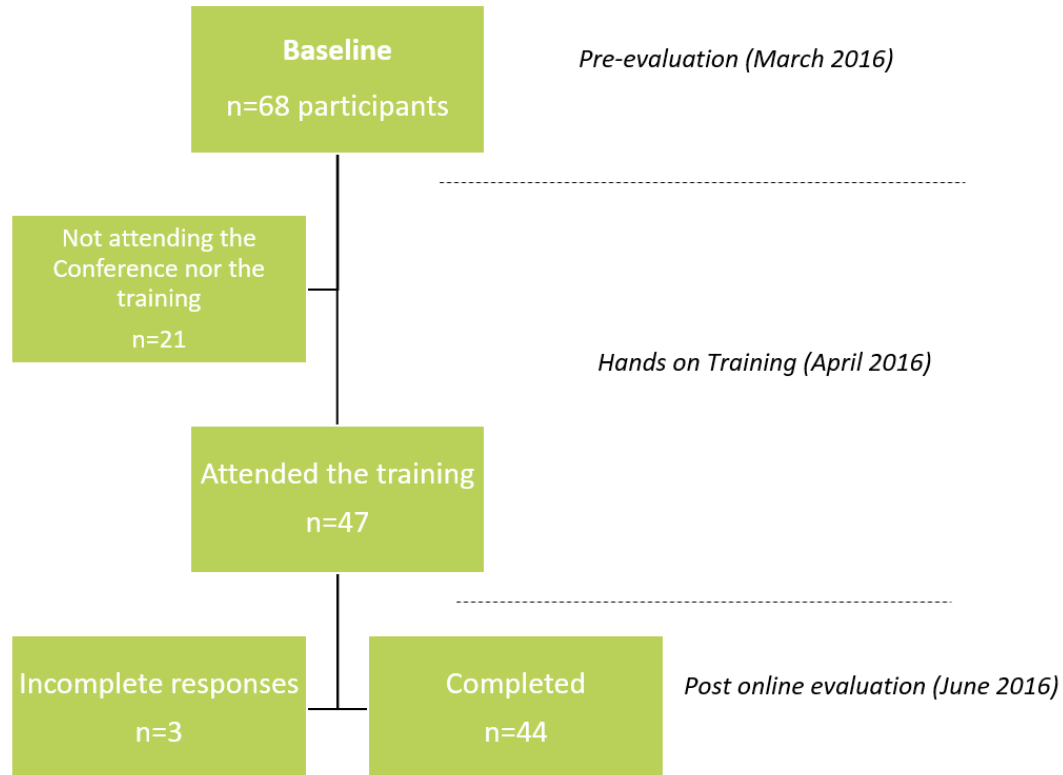
While 216 participants were present for the training programme the sample within the evaluation process were the selected 44 health professionals and clinicians from the 5 target countries (Armenia, Georgia, Romania, Russia and Ukraine).

Table 1: The country of origin of the 216 participants.



2.1.4 Evaluation process

Participants who were recruited to participate in the programme evaluation were asked to complete an online questionnaire developed for the purpose of the study, before the intervention (Baseline - March 2016). Immediately after the completion of the seminar, participants, answered the questionnaire again (1st Follow up -April 2016). Participants were asked to complete the online questionnaire, two months after the seminar (2nd follow up -June 2016). Health care professionals who completed all three phases of the sampling process, were included in the final analysis.



2.1.5 Participants in the programme evaluation

The participants of the evaluation group consisted of health care professionals and policy makers from 6 European countries (Russia, Ukraine, Georgia, Armenia, Romania and Greece). Table 1 depicts the demographic and descriptive characteristics of the participants and Table 2 their experience with smoking cessation. Overall, 75% of participants were women while 43.1% of the sample work on a hospital or family health team with an average of 28.6 (SD 28.9) patients per week. Participants had on average 20.6 (SD 23.5) years of practice. Most of the sample (64%) had not previously attended a similar seminar or training intervention for smoking cessation. Finally, 54.5% of the participants said that they record the smoking habits of patients attending.

Chart A: Origin of Evaluation participants (N=44)

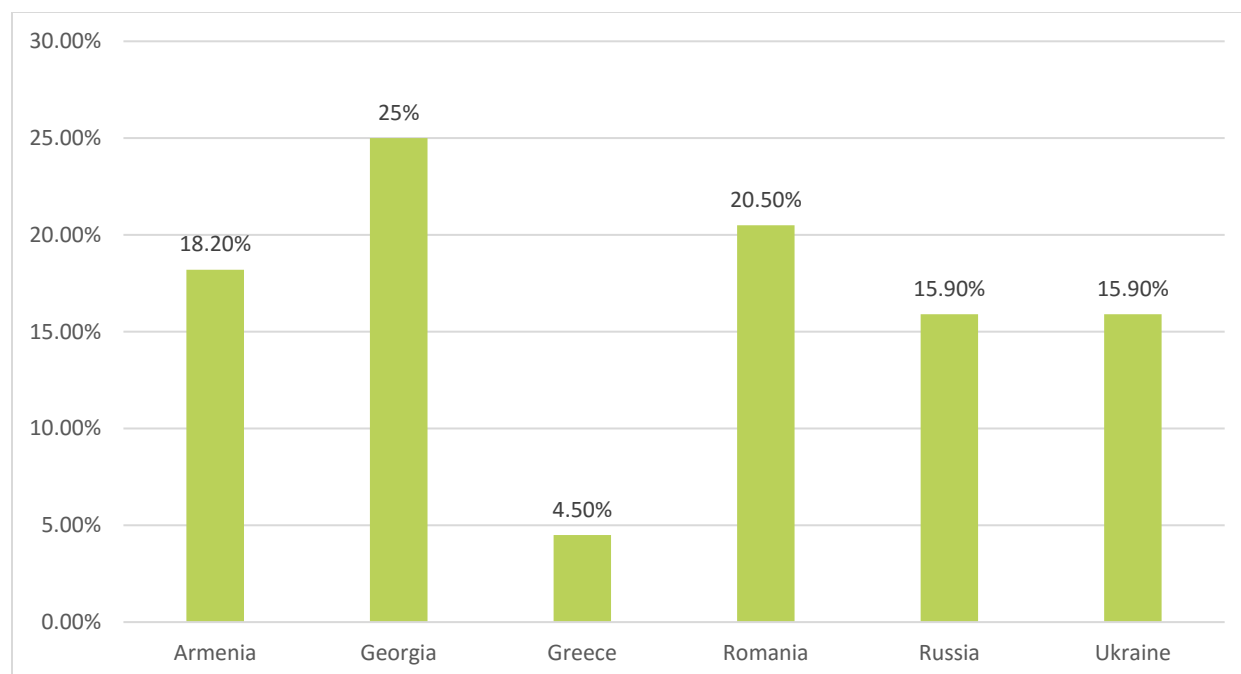


Table 1: Descriptive characteristics of the evaluation group (n=44)

Demographics	N	%
Sex		
Male	11	25
Female	33	75
Age		
<29 years	4	9.1
30-39 years	14	31.8
40-49 years	10	22.7
50-59 years	13	29.5
60-69 years	3	6.8
Primary Practice Setting		
Solo	3	6.8
Group	3	6.8
Hospital/ Family health team	19	43.1
Primary Care	3	6.8
Community	8	18.2
Other (NGO)	8	18.2
Area of practice		
Urban	43	97.7
Rural	1	2.3
Average patients per week	28.6(28.9) ^a	
Years of practice	20.6(23.5) ^a	

Table 2: Descriptive characteristics of the evaluation group (n=44)

Previous participation in a smoking cessation program		
Yes	16	36.4
No	28	63.6
Personal experience with the tobacco use		
Former smoker	9	20.5
Non smoker	35	79.5
What percentage of your patients are smokers?		
<10%	4	9.1
11% - 19%	2	4.5
20% - 29%	9	20.5
30% - 39%	14	31.8
40% - 49%	7	15.9
Greater than 50%	8	18.2
Which of the following supports are available in your clinic?		
Process to screen and document smoking status of patients	24	54.5
Self-help materials of smokers	24	54.5
Consult forms to guide you through quit smoking counselling interventions	14	31.8
None of the above	8	31.8
Other supports	8	31.8

All health professionals, involved in the study, received an information letter and a consent form, as defined by the Scientific Committee of ENSP. Written consent was obligatory in order to participate in the study. Moreover, the response rate in the evaluation of the intervention was 95.4%, since only two people did not complete the final questionnaire.

2.1.6 Evaluation Process

The tool used for the evaluation of the hands on training was a questionnaire developed by the University of Ottawa Heart Institute, specifically designed for primary care health professionals. This tool has proven to provide the service of the rates at which the professional provides therapeutic interventions. The Ottawa Heart Model for smoking cessation interventions was originally developed based on the research of Dr. Papadakis, Rafat Islam, Delluchi and is consistent with previous studies targeting the tobacco processing behaviors.^{8,9}

The questionnaire collected information about the demographics of health professionals such as gender, age, smoking status, number of years practicing, previous training in smoking cessation, 5As tobacco treatment guidelines delivery on site etc. At the same time, there were questions about the knowledge, attitudes, social norms, perceived behavioral control and intentions on the treatment of tobacco use. Participants responded using a 5-point Likert scale.

Pretest and post-test quantitative data were collected and analyzed. Using the chi-square test, the differences between pre- and post-tests were examined for statistical significance. Analyses were performed with SPSS 22.0

2.1.7 Results of the hands on training

The results showed statistically significant improvement of knowledge of individuals and their effectiveness in assisting smoking cessation issues, following the intervention. At the same time, they expanded their skills in relation to the techniques used in this field.

Specifically, a large percentage of people answered correctly after the intervention, the questions related to general knowledge, pharmacotherapy, techniques and the correct procedure to conduct a session smoking cessation.

The Pre vs. Post evaluation indicated

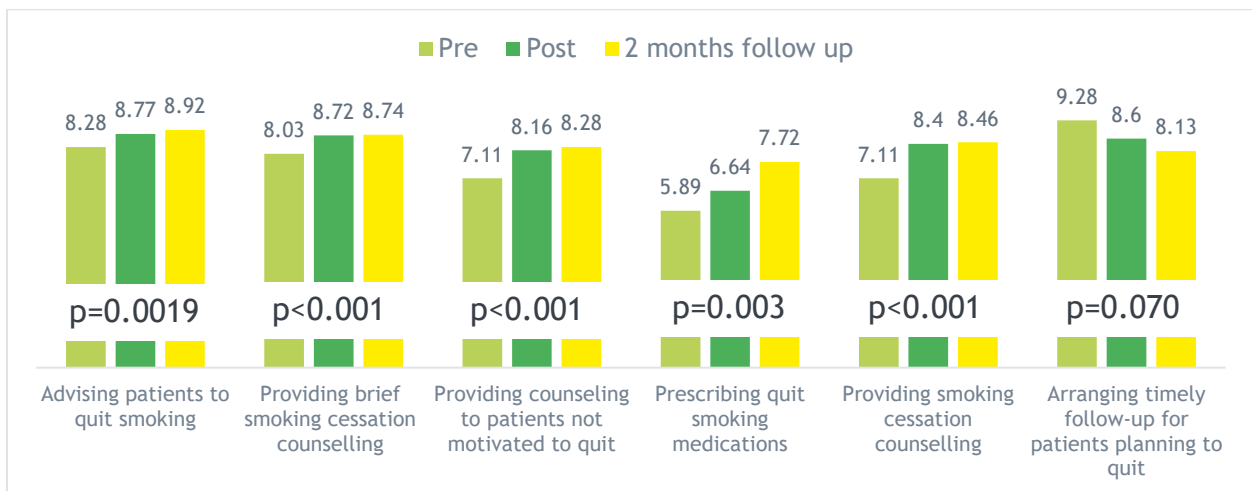
- ✓ Knowledge increased around issues of what are the effective therapies in smoking cessation (Pre 2.7% vs. Post 68%, $p < 0.001$)
- ✓ Knowledge of how much a typical craving lasts, (Pre 40.5% vs. Post 70.5%, $p = 0.007$),
- ✓ Knowledge of the side effects of Varenicline (Pre 54% vs. Post 80%, $p = 0.017$).
- ✓ The percentage that correctly answered what are the most effective treatments that increase quitting dramatically increased from 1% to 37% ($p < 0.001$)
- ✓ Knowledge of how long a craving lasts increased from 18% to 38% ($p = 0.007$)
- ✓ Awareness of the most common side effects for pharmacotherapy increased from 25% to 43% ($p = 0.017$)
- ✓ Awareness of the impact of the physicians advice on quit rates increased from 16% to 32% ($p = 0.03$)
- ✓ It is important to note that after the two day training 90% of participants stated that after the intervention that they have the required knowledge to help their patients ($p = 0.001$).

The two month follow up indicated that participants seemed to have retained their knowledge even two months later, although the level of statistical significance to some answers was not retained.

Chart B: Percentage of correct answers for health professionals before and two months after the intervention among the evaluation group participants



Chart C: Intention to Provide Smoking Cessation Counseling in practice



*range= 1-10, higher score represents higher intention

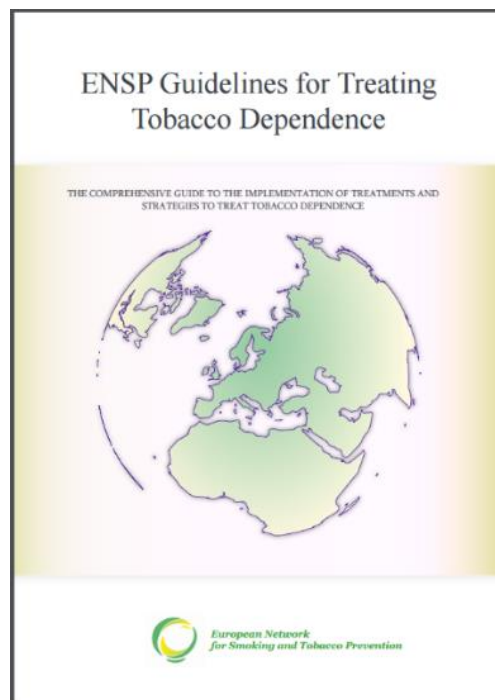
2.2 Guidelines Development

2.2.1 ENSP Guidelines

The ENSP Guidelines for treating tobacco dependence were initially developed in 2012 with the aid of Pfizer Europe. These guidelines were a base for numerous regional training and capacity building activities and were adapted/translated in English, Greek, Turkish, Romanian and Russian. However due to the changing landscape and additional evidence available with regards to the best practices in smoking cessation ENSP performed an update of the guidelines in 2016.

This 2nd Edition (developed by European Commission funds). The second edition of the guidelines was released in March 2016 and is free to download through a CC-BY license (ISBN 978-618-82526-0-8)

The Guidelines form a complete range of tools to support smoking cessation strategies. The work was undertaken by the Editorial Board of experts and a Board of reviewers from across the entire European continent. These guidelines are in accordance with Article 14 of the Framework Convention on Tobacco Control (FCTC).



Within the context of EPACKT-1, the above guidelines were translated – and culturally adapted into 5 European Languages. During the above translation and adaption process all effort was made to adapt the guidelines in light of regional circumstances, regional needs and approaches. These translated and adapted guidelines were published in 2016 under Creative Commons CC-BY licenses and all versions received an ISBN. These guidelines were made available as ebooks and are also freely available for downloading from www.ensp.org and www.elearning-ensp.org

Language	Title	ISBN
English	ENSP Guidelines for Treating Tobacco Dependence	978-618-82526-0-8
Romanian	GHIDUL ENSP PENTRU TRATAMENTUL DEPENDENTEI DE TUTUN	978-618-82526-1-5
Armenian	Ծխախոսակցի կախարհախորհրդի ԲՈՒԺՍԱԿ ՈՒՂԵՑՈՒՅՑ	978-618-82526-2-2
Georgian	თამბაქოს მოწევის შეწყვეტის ევროპული სახელმძღვანელო	978-618-82526-5-3
Ukrainian	ПОСІБНИК З ЛІКУВАННЯ ТЮТЮНОВОЇ ЗАЛЕЖНОСТІ ЗАМІСТЬ ПОСІБНИКА З ПРИПИНЕННЯ ТЮТЮНОКУРІННЯ	978-618-82526-4-6
Russian	РЕКОМЕНДАЦИИ ENSP ПО ЛЕЧЕНИЮ ТАБАЧНОЙ ЗАВИСИМОСТИ	978-618-82526-3-9

2.3 Pilot E-learning Program

2.3.1 The eLearning platform

Within the context of Aim 2 we developed a **pilot** eLearning platform to continue the development and expansion of an accreditation curriculum for tobacco cessation clinicians in Southern and Eastern Europe, and to enhance the formulation of a network of healthcare professionals that will be accredited in smoking cessation and dedicated to advancing evidence-based tobacco dependence treatment.

This pilot eLearning course was developed using Moodle and included seven training modules - developed based on the different domains within the ENSP Guidelines for Treating Tobacco Dependence (www.elearning-ensp.eu), that acted as the base of both the hands on and the online training. The 7 domains and their content are noted below.

- **PART ONE: RECOGNIZING TOBACCO USE AND TOBACCO DEPENDENCE IN GENERAL PRACTICE**
 - ✓ Chapter 1: Assessment of Tobacco Use and Tobacco Dependence and
 - ✓ Chapter 2: General Recommendations for the treatment of tobacco use and tobacco dependence
 - ✓ Chapter 3. Brief Advice on Stopping Tobacco Use
- **PART TWO: TREATMENT OF TOBACCO DEPENDENCE**
 - ✓ Chapter 4: Standard Tobacco Treatment Interventions
 - ✓ Chapter 5: Research and Recommendations for Evaluating Smoking Cessation Effectiveness
- **PART THREE: EUROPEAN STANDARDS FOR ACCREDITATION OF TOBACCO CESSATION SERVICES AND TRAINING IN TOBACCO CESSATION**
 - ✓ Chapter 6: Recommendations to train health professionals in the treatment of tobacco use and dependence and quality standards for tobacco cessation specialists and services
- **PART FOUR: EFFECTIVE CESSATION TECHNIQUES FOR BUSY FAMILY MEDICINE PROVIDERS**

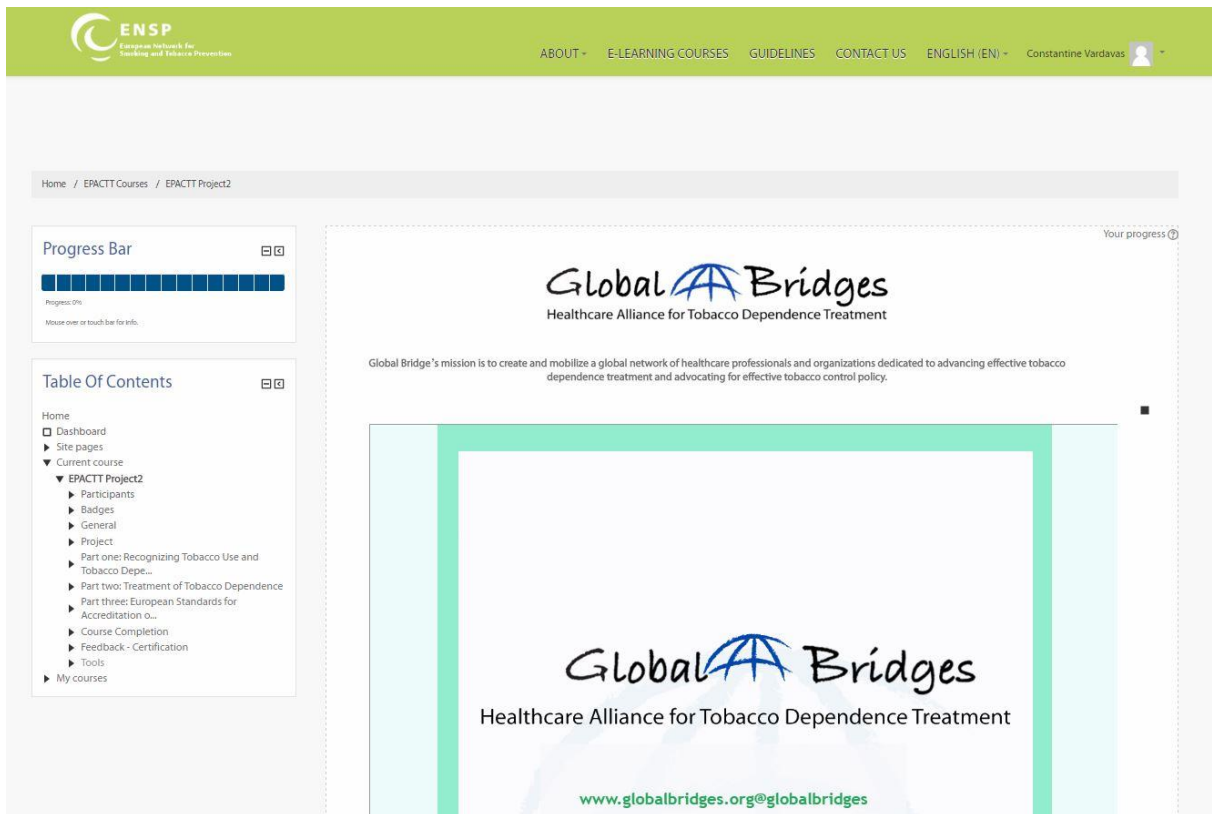
Each course consist of three sections:

1. The theoretical material
2. The testing knowledge and
3. The evaluation of the course.

By participating in e-learning platform, all participants could:

- ✓ Choose the duration, the time and place of the training
- ✓ Interrupt and continue the training depending on their available time.
- ✓ Choose the module they wish to follow
- ✓ It is important to note that the lessons and ppts in the eLearning platform are currently available in 6 languages (English, Armenian, Russian, Ukrainian, Romanian and Georgian). However as the current eLearning platform is only in pilot form, further refinement, development and adaptation is needed for it to be fully operational. These aspects are addressed in Section 4. Sustainability.

- ✓ The e-courses can be accessed through any computer or mobile device and upon successful completion of each module, participants will receive a certificate of completion.



4.0 DISSEMINATION ACTIVITIES

4.1 Presentations / publications

The EPACTT team has delivered numerous presentations of the project at local, European and International meetings and conferences. In particular presentations were performed at the following:

- ✓ SmokeFree Greece: World No Tobacco Day awareness presentation 15 June 2015
 - ✓ ENSP Capacity workshop and Network meeting, October 19-21 2015, Vilnius, Lithuania
 - ✓ Talking About Addictions: An Awareness Week on Addictive Behaviors, Sensitization, Prevention and Treatment Options, Deere - The American College of Greece, *March 21-24, 2016, Athens, Greece*
 - ✓ ENSP Conference on Tobacco Control: Research, Prevention and Treatment, April 5-7 2016, Brussels, Belgium
 - ✓ Global Tobacco Dependence Treatment Summit, *May 23-24, 2016, Mayo Clinic, Rochester, USA*
 - ✓ European Advocacy Summit on the Treatment of Tobacco Dependence, June 9th 2016, Madrid, Spain
 - ✓ European Respiratory Society (ERS) International Congress, *September 3-7, 2016, London, UK*
 - ✓ Smoking Cessation and high-risk groups: adults with cardiovascular disease, chronic obstructive pulmonary disease and diabetes. A special training workshop for clinicians. October 10, 2016, Iasi, Romania
 - ✓ Smoking Cessation during Pregnancy and the postpartum period. A special training workshop for midwives and treating tobacco dependence. *October 15, 2016, Athens, Greece*
 - ✓ Pfizer Eagle Meeting, October 17-18 2016, Prague, Czech Republic
 - ✓ ENSP Capacity Building Event and Network Meeting, *October 19-21, 2016, Ljubljana, Slovenia*
 - ✓ Tobacco Control Workshop for Health Professionals, October 25-26 2016, Warsaw, Poland
 - ✓ 7th Panhellenic congress on tobacco control, *December 1, 2016, Athens, Greece*
- ✓ Two manuscripts reporting on the outcomes of the project evaluation are in preparation and we hope to have these submitted in early 2017.



4.2 Young professional capacity Building Activities

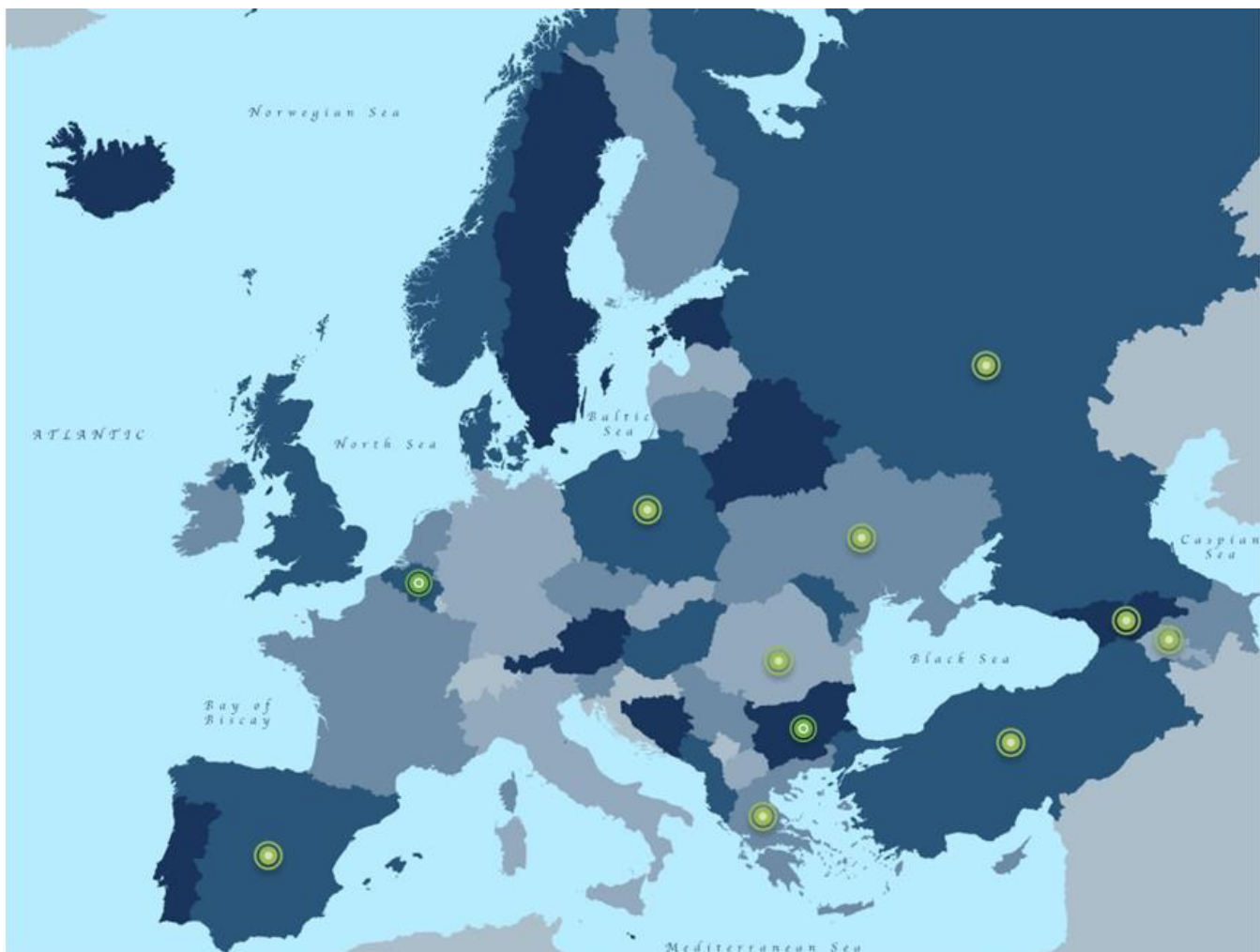
While the entire project aimed to develop capacity building in the European Region on Tobacco control with the training of health care professionals and policy makers it is important to note that the project also led to the training of junior staff in the team. In 2016, one of our postgraduate trainees obtained her Master's Degree (Neurological Diseases – Evidence Based Practice, from the Department of Nursing of the TEI of Athens, Greece) with a dissertation based on the results from the EPACTT project. Ms. Theodosia Peleki successfully defended her Master's Thesis on June 21, 2016. The thesis examined the physician's role in tobacco control and investigated if a rapid educational intervention could improve attitudes and knowledge of health care professionals in smoking cessation.



5.0 SUSTAINABILITY AND PROGRAM EXPANSION

Building on the success of the EPACTT-1 project, the EPACTT-1 team and ENSP has established with the second phase of the EPACTT program (EPACTT-2) to expand the activities and training of EPACTT among health care professionals and policymakers in the Southern, Central and Eastern European region. Hence, the overall goal of EPACTT-2 is to continue the development and expansion of an accreditation curriculum for tobacco cessation clinicians in the European Region, and to enhance the formulation of a network of healthcare professionals that will be accredited in smoking cessation and dedicated to advancing evidence-based tobacco dependence treatment. The project will utilize the extensive network of ENSP, and the funding from the Pfizer IGL&C grant, to promote the development of champions in both tobacco treatment and control.

The above capacity development will be performed through the triangulation of an online training program – accredited for EUCCE Credits accompanied by translated and adapted tobacco treatment guidelines and tools. An overview of the countries that will participate in EPACTT-2 is depicted below.



6.0 REFERENCES

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