

1. Overall Aim & Objectives

The overall aim of The Art of Quitting is to improve tobacco use cessation through interventions provided by Memorial health professionals and to ensure enforcement of the Joint Commission's 2013 mandates for tobacco cessation. These mandates state:

1. On Admission: document tobacco-use status of all patients
2. During Hospital Stay: deliver evidence-based cessation counseling and medication
3. At Discharge: arrange for evidence-based counseling and prescribe medication for period after discharge
4. After Discharge: check tobacco-use status (Fiore, Goplerud, and Schroeder 2012).

The Joint Commission's Quality Measures also include Tobacco Use Screening, and Tobacco Use Treatment Provided or Offered.

In addition, The Art of Quitting will enforce Health Employer Data Information Set (HEDIS) 2002 measures, which are sponsored, supported, and maintained by the National Committee for Quality Assurance (NCQA): Advising smokers to quit, offer of smoking cessation medications and offer of strategies for support and assistance with quitting.

The following key objectives were selected because they are SMART - Specific Measurable Achievable Realistic and Time Sensitive:

- To educate at least 75% of Memorial clinical staff on how to provide tobacco cessation access to and make referrals to a tobacco cessation program
- To provide access and referrals to a tobacco cessation program to at least 90% of Memorial patients who identify themselves as tobacco users and who wish to quit
- To host Quit Smoking Now on Memorial campuses
- To complete a tobacco cessation treatment plan template for the EHR
- To train at least 90% of Memorial nursing staff on how to document in the EHR for inpatient services
- To record follow-up data for at least 80% of Memorial patients referred to Quit Smoking Now to ascertain whether they are tobacco-free after 1 week, 4 weeks, 3 months, 7 months and 9 months.

To meet the overall aim, The Art of Quitting will train Memorial staff and healthcare providers on the referral process. The Art of Quitting will refer tobacco users to Nova Southeastern University/Area Health Education Center's (NSU/AHEC) program, Quit Smoking Now, sponsored by The Broward County Health Department Tobacco Control Program. NSU/AHEC will conduct the program in English and Spanish onsite at Memorial facilities. It is a six-week program developed by ex-smokers and offers group counseling sessions by trained tobacco cessation specialists. Participants also receive eight weeks of free Nicotine Replacement Therapy.

Two Memorial trainers will conduct in-service programs for Memorial staff members about the Joint Commission's mandates for providing tobacco cessation services to patients. The training will be mandatory for all employees and they will be eligible to receive CMEs/CEUs. Educational

opportunities for staff will also be available through Memorial's e-learning and Lunch and Learn programs.

The Joint Commission's 2013 mandates for tobacco cessation include recommendations for documenting tobacco use status of all patients, documenting cessation counseling and medications prescribed, and documenting follow-up contact with patient 30 days after discharge to determine tobacco use status. To help physicians with the Joint Commission's documentation requirements, a tobacco cessation treatment plan template will be designed and added to Memorial's existing Electronic Health Record (EHR) system, Epic, and staff will receive training upon its completion. To ensure all Memorial employees are aware of the new protocols, presentations will be made at all New Employee Orientations and at internal Leadership Development sessions held three times a year.

The Art of Quitting will have a significant impact by helping Memorial meet the Joint Commission smoking cessation performance measures and by enhancing the opportunity for more patients to be tobacco free. Memorial is a safety-net healthcare provider that has a long history of offering quality services to the community. Because The Art of Quitting builds on the institution's mission of promoting community health, it is an excellent fit for Memorial.

2. Current Assessment of Need in Target Area

There are almost half a million deaths annually from tobacco use and it remains the chief preventable cause of death in this country, accounting for approximately 443,000 deaths, or 1 of every 5 deaths, in the United States each year. According to the CDC, an estimated 45.3 million people, or 19.3% of all adults (aged 18 years or older), in the United States smoke cigarettes and cigarette smoking costs more than \$913 Billion dollars annually. This translates into \$97 Billion in lost productivity and \$96 Billion in healthcare expenditures.

According to 2010 Florida Behavioral Risk Factor Data, 17% of adults in Florida smoke and 60% of these smokers have tried to quit at least once in the past year. In Broward County, the second most populous county in Florida with 1,748,502 residents, 13.7% of adults are current smokers and 64.5% of them have tried to quit at least once in the past year.

Tobacco use causes many chronic and debilitating diseases such as heart disease, stroke, multiple cancers, and respiratory illnesses, as well as complications of pregnancy such as preterm delivery and low infant birth weight. Smoking harms nearly every organ of the body. To improve health outcomes and reduce costs, the widespread promotion of tobacco cessation programs is critical. One of the best places to do this is at physicians' offices because 70% of smokers visit their primary care doctor each year, making health care visits teachable moments for smokers. Inpatient stays also present teachable moments for tobacco-use treatment, especially if a patient is admitted because they have a smoking-related illness. Getting sick often motivates patients to reconsider their life choices and motivates smokers to think about quitting, making the hospital stay an ideal time for prevention activities. (Centers for Disease Control and Prevention 2006).

There is strong evidence that advice from a health care professional can greatly impact smoking cessation success rates. Research also shows that patients are more satisfied with the care provided when their primary care physician offers smoking cessation interventions - even if patients are not yet ready to quit (American Academy of Family Physicians 2012). A 2008 study showed that even when doctors provided brief, simple advice about quitting smoking, it increased the likelihood that someone who smokes will successfully quit and remain a nonsmoker 12 months later (Stead, Bergson, and Lancaster 2008).

Tobacco use interventions have received attention from the medical staff at Memorial but the priority for clinicians has mostly focused on patient concerns and potential acute medical needs during the limited office visit time. Clinicians are also under pressure to provide patients with a wide range of preventive services and comprehensive care for an increasing number of chronic medical conditions. So, although clinicians generally want their patients to stop smoking, they often believe that they do not have the time or expertise to address this issue, or they may not consider tobacco-use treatment to be a top priority for the time-limited office visit. Patients rarely make an appointment specifically for or request assistance with quitting smoking. (Centers for Disease Control and Prevention 2006.).

For outpatients, the only routine assessment and counseling about tobacco use occurs in the primary care clinic, which mostly serves the uninsured. If the patient is interested, a referral is made to the NSU/AHEC Quit Smoking Now program. NSU/AHEC follows up directly with the patient. A primary care nurse contacts the patient for feedback after they have begun the program and makes a second call at seven weeks, but no further follow-up is conducted.

For inpatients in one of Memorial six hospitals, any of the patient's physicians or nurses can generate an order for tobacco cessation counseling, which is sent to the Respiratory Therapy Department. A therapist will then visit the patient and assess the patient's willingness to quit smoking. If the patient is receptive, the respiratory therapist provides handouts purchased from the American Lung Association and plays a video on the in-house hospital TV network addressing tobacco cessation. The respiratory therapists often see 400 -500 patients per month, which does not allow time for effective counseling. The only inpatients who consistently receive referrals to the NSU/AHEC Quit Smoking Now program are those who have had cardiac surgery. No follow up of any kind is conducted. This is a huge gap at Memorial. Overall, significant gaps have been identified and need to be addressed in both outpatient and inpatient facilities at Memorial.

Recently, all Memorial campuses and facilities have adopted a tobacco free policy. This new rule, along with the Joint Commission's tobacco mandates, necessitates that Memorial proactively works on providing tobacco cessation classes on campus and staff trainings on how to appropriately counsel and refer patients to these classes.

Another identified gap exists within Memorial's system-wide comprehensive Electronic Health Record (EHR) System, Epic. Epic enables providers to document smoking status and history, interest in counseling, referral to counseling and quit date but does not have a mechanism to reliably track participation in and completion of counseling and possible relapse. As NSU/AHEC's smoking cessation program is not part of Memorial, its providers do not have access to Epic to update data on patient participation. To be effective, Epic needs to track the following metrics: 1) smoking status 2) interest in counseling 3) referral to counseling 4) participating in counseling 5) completed counseling 6) quit date and 7) relapse date. Implementation of The Art of Quitting will include modification of Epic to include the missing data elements, and creation of a workflow for tracking patients who attend the NSU/AHEC program.

Funding from Pfizer will assist in devising an effective referral process and in capturing the data necessary to follow the outcomes of the program, bridging these identified gaps.

3. Technical Approach, Intervention Design and Methods

In accordance with its overall aim and objectives, The Art of Quitting will use two trained tobacco cessation facilitators to provide training sessions to Memorial healthcare providers and will offer CMEs/CEUs for the attendees. This will be done in partnership with Memorial's Organizational Development Department which manages staff education and course credits. Lunch and Learn programs, along with e-learning, will be used as additional educational venues concerning tobacco cessation. Awareness of The Art of Quitting program will be further increased by presentations at New Employee Orientation and at internal Leadership Development sessions, which are held three times a year.

NSU/AHEC trainers will present the Quit Smoking Now on Memorial hospital campuses in English and Spanish. Existing brochures, flyers and posters provided by Quit Smoking Now will be adapted to feature the Memorial logo to enforce the partnership. Memorial and NSU/AHEC already work together so there is a solid relationship between them that will be strengthened through this grant. NSU/AHEC has readily agreed to work with Memorial on this initiative and to share data. NSU/AHEC has provided a letter of commitment.

The AHEC Quit Smoking Now program serves 19 counties in South and Central Florida and is a recognized leader in developing accessible cessation counseling services in concert with a wide range of healthcare organizations including hospitals, community health centers, health departments, and private practitioners. The program is a major component of Florida's Comprehensive Statewide Tobacco Education and Use Prevention Program and it focuses on working with health services providers to implement system changes that will lead to increased tobacco dependency treatment and developing opportunities for tobacco users to access counseling services within their local communities.

Quit Smoking Now consists of six sessions tailored to the unique needs of the community and clients which it serves. It incorporates the philosophy of the Centers for Disease Control and

Prevention's (CDC) *Best Practices for Comprehensive Tobacco control* and the *Clinical Practice Guideline for the Treatment of Tobacco Use and Dependence* published by the US Department of Health and Human Services Public Health Service. The Quit Smoking Now program is funded by the Florida Department of Health through the Tobacco Settlement dollars, a settlement of nearly \$13 Billion. As indicated in their Letter of Commitment, NSU/AHEC greatly supports The Art of Quitting and will accept any referrals Memorial sends to them.

As recognized in a 2011 report by Professional Data Analysts, Inc., a national independent evaluator contracted by the Florida Department of Health, the AHEC Quit Smoking Now tobacco cessation counseling program is an "effective and well-received intensive evidence-based intervention." In 2011 alone, Florida's AHEC Programs provided cessation services to over 8,000 individuals in all of the state's 67 counties. The 30-day quit rates for participants who completed AHEC Quit Smoking Now group counseling was calculated at 37.1%, which was deemed "a strong quit rate" by the independent evaluator (Greenseid et al 2011).

An EHR tobacco cessation treatment plan template will be designed and implemented within Memorial's Epic system. Right now, Memorial is nearing completion of the system-wide implementation of the Epic EHR and the software will be fully deployed within all facilities and practices by early 2013. Representatives from the Memorial team responsible for configuring and implementing Epic have already identified several specific mechanisms for tracking tobacco use behavior, counseling, and cessation. Because Epic will be implemented across the entire system, it is the ideal mechanism for prompting health care providers to identify active tobacco users, refer them to counseling, and to collect follow-up data that will be used to generate reports on desired metrics.

Memorial healthcare providers will be able to access customized templates for documentation in Epic. Similarly, if patients relapse, a customized template with relapse date will document this occurrence in Epic. Availability of these discrete elements within each patient's record will enable regular production of reports on overall program metrics and success rates.

Memorial is prepared to commit the necessary resources for The Art of Quitting. A signed letter attesting to the commitment is included from the Memorial Foundation Senior Vice President and Chief Executive Officer, Kevin Janser, and from Memorial's Senior Vice President and Chief Medical Officer, Stanley Marks, MD. This commitment extends beyond Pfizer funding since sustaining the program will not be cost prohibitive. The trainers are already Memorial employees and will remain employees after the grant ends. Memorial also fully intends to continue providing staff trainings on Joint Commission mandates, on the tobacco cessation referral process and on EHR documentation as new employees come on board. Memorial is committed to maintaining a smoke free environment.

Memorial's mission is to improve the health of the community it serves and hosting Quit Smoking Now for Memorial patients, even after the grant ends, will help fulfill this mission. Memorial also recognizes how important it is to meet Joint Commission mandates and to

maintain a smoke free environment on its campuses. Memorial's grant team will explore additional sources of funding as a supplement.

4. Evaluation Design

The following metrics will be used to measure the success of The Art of Quitting at addressing the gaps identified in the previous section:

1. Sign-in logs at trainings will track the number of staff who attended the tobacco counseling and referral class and will track which staff members have attended.
2. Epic's tobacco cessation treatment plan template will be used to track how many patients receive tobacco cessation referral services.
3. NSU/AHEC will provide The Art of Quitting Project Manager with data on Memorial patients who register for Quit Smoking Now. This will be done in a manner that complies with HIPPA requirements.
4. NSU/AHEC will provide The Art of Quitting Project Manager with follow-up data on quit rates for Memorial patients who successfully complete Quit Smoking Now at 1 week, 4 weeks, 3 months, 7 months and 9 months. This will be done in a manner that complies with HIPPA requirements.

NSU/AHEC will be responsible for coordinating all the Quit Smoking Now classes provided at Memorial facilities and will provide a quarterly report to the Program Manager with survey results designed to measure participants' success with the program and their satisfaction with the class facilitator. NSU/AHEC also works with an outside evaluator, funded by the State of Florida, who conducts follow-up calls with class participants at the seven month mark. These findings will be shared with Memorial's Project Manager.

Project outcomes will be broadly disseminated through presentations at internal Leadership Development sessions and at internal Managers meetings, both of which are held three times a year. In addition, the Office of Human Research will send out email blasts to Memorial staff updating them on the success of The Art of Quitting. To disseminate to the community, project outcomes will be shared in the community newsletter sent out by Memorial's Chief Executive Officer.

Please see the Logic Model on the next page.

Resources	Activities	Outputs	Outcomes	Impact
<p>Pfizer Funding</p> <p>Memorial staff and healthcare providers</p> <p>Patients</p> <p>EHR</p> <p>NSU/AHEC program Quit Smoking Now</p> <p>Sign-in logs at Quit Smoking Now</p> <p>Quit Smoking Now brochures , flyers and posters with Memorial logo</p>	<p>Train staff on how to refer patients to successful evidence-based tobacco cessation program</p> <p>Staff provide tobacco use cessation referrals to patients</p> <p>Host NSU/AHEC program Quit Smoking Now on hospital campus</p> <p>Create an EHR tobacco cessation treatment plan template in Epic</p> <p>Train staff on how to use new EHR tobacco cessation treatment plan</p> <p>Record follow-up data for Memorial patients referred to Quit Smoking Now at 1 week, 4 weeks, 3 months, 7 months and 9 months</p>	<p>To educate at least 75% of Memorial clinical staff on how to provide tobacco cessation access to and make referrals to a tobacco cessation program</p> <p>To provide access to and referrals to a tobacco cessation program to at least 90% of Memorial patients who identify themselves as tobacco users and who wish to quit</p> <p>To host Quit Smoking Now at Memorial facilities by June 2013</p> <p>To complete a tobacco cessation treatment plan template for the EHR by June 2013</p> <p>To train at least 90% of Memorial nursing staff on how to document in the EHR for inpatient services</p> <p>To record follow-up data for at least 80% of Memorial patients referred to Quit Smoking Now to ascertain whether they are tobacco-free after 1 week, 4 weeks, 3 months, 7 months and 9 months.</p>	<p>Trained staff provide access to and referrals to tobacco cessation program</p> <p>Memorial has an in-house tobacco use cessation program</p> <p>The EHR contains a tobacco cessation treatment plan</p>	<p>Memorial will meet the Joint Commission smoking cessation performance measures</p> <p>Memorial patients are tobacco free</p>

References

American Academy of Family Physicians (2012). Ask and Act Tobacco Cessation Program. Retrieved from <http://www.aafp.org/online/en/home/clinical/publichealth/tobacco.html>.

Centers for Disease Control and Prevention (2006). A Practical Guide to Working with Health-Care Systems on Tobacco-Use Treatment. Atlanta, GA.

Fiore, Michael C, Goplerud, Eric, and Schroeder, Steven, A. (2012). The Joint Commission's New Tobacco-Cessation Measures – Will Hospitals Do The Right Thing? *The New England Journal of Medicine* March 29, 366;13.

Greenseid, L.O., Lien, B., Rainey, J., Ficek, A (2011). *Area Health Education Centers (AHEC) Cessation Interventions Evaluation FY 11 Final Evaluation Report*. Prepared for the Bureau of Tobacco Prevention Program of the Florida Department of Health by Professional Data Analysts, Inc. Minneapolis, MN. December 15.

Stead LF, Bergson G, Lancaster T. (2008). Physician advice for smoking cessation. *Cochrane Database of Systematic Reviews*, Issue 2.

Detailed Work Plan and Deliverables Schedule

STATEMENT OF WORK		Year 1 (2012-2013)			Year 2 (2013-2014)		
		Dec-Mar	Apr-Jul	Aug-Nov	Dec-Mar	Apr-Jul	Aug-Nov
TASK 1	Program Set-Up	X	X	X	X	X	X
1.1	Program Design	X					
1.2	Set up classes/online training with Organizational Dev	X	X				
TASK 2	Training of Memorial employees	X	X	X	X	X	X
2.1	Lunch and Learns		X	X	X	X	X
2.2	Online Training		X	X	X	X	X
2.3	Leadership development/New employee orientation		X	X	X	X	X
2.4	Training of clinical outpatient and inpatient nursing staff		X	X	X	X	X
2.5	Track attendance/distribution of educational tools		X	X	X	X	X
TASK 3	Educational Tools Development/Adaptation	X	X	X	X	X	X
3.1	Brochures/Flyers	X	X	X	X	X	X
3.2	Mass Emails		X	X	X	X	X
3.3	Posters		X	X	X	X	X
TASK 4	NSU/AHEC courses	X	X	X	X	X	X
4.1	Distribute referral forms to inpatient and outpatient areas		X	X	X	X	X
4.2	Host onsite Quit Smoking programs		X	X	X	X	X
4.3	Track referrals	X	X	X	X	X	X
4.4	Track outcomes		X	X	X	X	X
TASK 5	EPIC EHR	X	X	X	X	X	X
5.1	Build tobacco cessation treatment plan	X					
5.2	Run Quarterly reports		X	X	X	X	X
5.3	Quarterly review of data		X	X	X	X	X