

## Overall Aim & Objectives

Aultman Hospital is pleased to present the **Reforming Inpatient Tobacco Treatment** program to the Smoking Cessation Leadership Center and Pfizer Medication Education Group. To meet the needs of our hospital and community, Aultman has developed a program to reform the way that we treat inpatients that use tobacco. The overarching goal is to increase the quit rate of our inpatient population by implementing Joint Commission's recommended measures for inpatient tobacco treatment.

Aultman Hospital has many of the necessary pieces for a successful tobacco treatment program. The Reforming Inpatient Tobacco Treatment project will bring these pieces together with:

- Personnel training
- New policies and procedures around tobacco treatment for the inpatient
- Information technology changes for better tracking, reporting, and provider communications

**The Reforming Inpatient Tobacco Treatment project will allow Aultman Hospital to implement comprehensive tobacco treatment for all inpatients, while achieving the Joint Commission TOB-4 measures.** The timing for this project is perfect for Aultman Hospital. In 2010, spurred by the County Health Rankings, Aultman created the Health Vision 2020 initiative to reduce tobacco use and obesity rates in our community. After seeing that inpatient procedures needed to be improved, the principal investigator created an inpatient tobacco committee early in 2012. This committee started by identifying how Aultman can move ahead on the Joint Commission recommendations for tobacco treatment of inpatients. The committee is engaged and has already started project planning and involving stakeholders toward this goal. **Funding of the Reforming Inpatient Tobacco Treatment project will move our plans into reality.**

With our more recent inpatient focus, Aultman has updated discharge paperwork to include information on tobacco cessation to remind patients of its importance. Also, smoking cessation therapies have been added as a physician order set in our Computerized Physician Order Entry system.

Joint Commission describes TOB-1 as screening hospitalized patients for tobacco use within the past 30 days during their hospital stay. At Aultman, it is already a requirement to screen all patients upon admission for tobacco use. But, because personnel are able to bypass the tobacco question, and are not prompted to complete the information later, some patients are falling through the cracks. One department where this is evident is in Labor and Delivery, where it can be difficult to question a patient in active labor. Yet, it is critical that new parents receive cessation information at this time of a major life change. By combining staff education with system improvements (such that require the field to be completed after delivery) we can achieve 100 percent compliance in tobacco use screening.

Aultman has a history of tobacco cessation work and has been a smoke-free campus since 2007. For the community, we have offered the "Give It Up!" program for more than five years. "Give It Up!" is a six-week class series taught by certified tobacco treatment specialists. The

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classes are free and are open to everyone in the community, and more than 67 people participated in the classes in 2011. As the largest employer in Stark County, Aultman also offers guidance for other area businesses and organizations looking to strengthen their tobacco-free policies.

Aultman is currently not offering tobacco treatment across all hospital departments as a process consistently. Right now, when a patient is identified as a tobacco user, the respiratory therapy personnel bring a "Commit to Quit!" bag to the patient's room with cessation materials. Also, a cessation video is started using the patient video on demand system. While this education is important, the current process is missing the treatment component, as well as the consistent offering of nicotine replacement therapy.

Currently, patients are also contacted after discharge to be invited to the free "Give It Up!" cessation classes. But, Aultman has a gap in the tobacco treatment while the person is still in the Hospital. This gap exists because of the proper technology implementation. Funding will allow for new reporting and technology enhancements to make sure that patients are reached in the needed timeframe, and tobacco users don't fall through any cracks. The interventions performed by Aultman will be consistent with Joint Commission measures and move the hospital along the system to achieve the TOB-4 status of following up with patients upon discharge.

Patients will receive more comprehensive education on smoking cessation and treatment options available at the bedside with better trained staff. This will provide the staff and physician an opportunity to intervene prior to the patient being discharged. With this complete circle of care, we will see a 25 percent increase in our quit rate within the hospital. With the provided interventions, we have the ability to increase our quit rate and have permanent policy change within the hospital.

In addition, with Reforming Inpatient Tobacco Treatment, Aultman will bring a Certified Tobacco Treatment Specialist training program to Stark County. Right now, area tobacco treatment providers must send staff more than 100 miles away and incur fees, lodging and travel costs in order to have staff trained to become Certified Tobacco Treatment Specialists. Funding will allow Aultman to partially offset the cost to bring the course here, so that many more people can get this important training. By offering the training on site, Aultman can multiply the efforts and have more people trained to provide tobacco cessation services. This will also open opportunities for other local hospitals and community agencies to utilize the training and increase the trained professionals across our Ohio region. In addition to Aultman Hospital, four other hospitals have confirmed interest in the Certified Tobacco Treatment Specialist Training for their staff, if available locally.

Aultman Hospital will contract with The Mayo Clinic to offer the on-site training for up to 15 qualified professionals. This course is a four-day intensive training that provides the Tobacco Treatment Specialist certification at the completion of the course. The primary goals of the course are to "aid health care professionals in becoming competent in the provision of treatment for people who are dependent on tobacco and formally recognize that competence. Although a national certifying organization for TTS does not yet exist, the Nicotine Dependence

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Center (NDC) has worked closely with the Association for the Treatment of Tobacco Use and Dependence (ATTUD) [[www.attud.org](http://www.attud.org)] and others to establish standards for core competencies, training, and credentialing of tobacco treatment providers” (Training Summary, 2012).

This training will provide at least five additional Certified Tobacco Treatment Specialists (CTTS) at Aultman Hospital to be able to see at least four tobacco-using patients per day. This equals a minimum of 1,460 patients each year that Aultman will be able to serve because of the Reforming Inpatient Tobacco Treatment program. With funding, Aultman will focus primarily on adults 18 years or older that are admitted as an inpatient to the hospital. This will provide life changing tobacco treatment to 16 percent of our inpatient smoking population. After the grant term, our progress toward treating tobacco use will continue. Our long-term goal is to then extend the services to be offered through all transitions of care, including our skilled nursing facility as well as outbuilding locations. Because other hospitals and community agencies may also participate in the Certified Tobacco Treatment Specialist training, the impact to our community will be multiplied to the lives that those organizations reach also.

#### **Current Assessment of Need in Target Areas**

Aultman Hospital is located in Stark County, Ohio and serves a five county market area of over 600,000 people. While our focus on helping our community with tobacco cessation began years before, Aultman’s passion for tobacco cessation was spurred by the County Health Rankings report released by Robert Wood Johnson in 2010. In this report, Stark County ranked 44 out of 88 counties. Aultman began to focus on how we could improve the health of our county and community. Sharla Elton became the program director for Health Vision 2020 in fall of 2011. Since then, Mrs. Elton has launched Aultman initiatives, tracked progress, collaborated with the community and monitored newly released health rankings. In spring of 2012, Aultman ranked 41 out of 88 counties. Aultman continues to strive to improve the health of our community, but began to focus on our internal processes and what we could do to improve quit rates among our inpatient population.

According to the County Health Rankings, 23 percent of Stark County’s population uses tobacco. Aultman has over 40,000 inpatient admissions annually, which indicates that approximately 9,200 of Aultman inpatients are smoking or use tobacco. Aultman has set plans in motion to tackle this high percentage of tobacco users. One of the key focuses of Health Vision 2020 is to increase quit rates and participation to our “Give it Up!” classes.

In the Stark Poll Summary, 56.4 percent of those surveyed indicated that they are aware of how unhealthy smoking is and plan to quit. The Stark Poll Assessment was designed with the community in mind and brought several local business, hospitals and resources to one location to filter information on how to improve the health of our community. Fifteen questions were included on the Stark Poll, and annual random sample telephone survey with a sample size of 1,067 Stark County households. The survey was conducted by the Center for Marketing and

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Opinion Research (CMOR) and provided insight for our county as a whole and a starting process for our patients.

America's Health Rankings released a report stating that out of the 50 states, Ohio is ranked 45<sup>th</sup>. According to the report, "In the past year, smoking increased from 20.3 percent to 22.5 percent of the adult population, with nearly 2.0 million adults who still smoke" ([www.americashealthrankings.org](http://www.americashealthrankings.org), 2012.) This is a staggering number for Ohio. As the largest hospital and employer in Stark County, Aultman can start by improving our own community. Stark County has 379,466 people residing within the county; in our county alone, 87,277 people are smoking. Although, we can't begin to treat everyone, we can start within our own hospital walls.

Aultman has taken measures to be proficient with the Joint Commission guidelines. The first step is screening of all patients to verify their tobacco use within the last 30 days. We will establish new technical guidelines to ensure that 100 percent of our patients are being screened, currently, we are at 52 percent. Aultman has researched evidence-based practices to determine the best way to progress from TOB-1 to TOB-4. A Case study provided by [www.prevent.org](http://www.prevent.org) identified Massachusetts General as an ideal model for their three step program to implement a strong inpatient tobacco policy. Massachusetts General's first step is to identify every smoking status during the hospital admission process. Aultman has the field developed in our electronic charting to identify this status; our goal will be 100 percent of our patients will be screened. We will also increase our number of Certified Tobacco Treatment Specialists employed at Aultman Hospital. With our training and information technology changes we can further the Health Vision 2020 Initiative and match the model identified by Massachusetts General. Currently our "Commit to Quit" program is delivering 1,000 bags delivered per year. With an increase in our staff and counseling, we will reach the target of 1,460 patients per year.

### **Technical Approach, Intervention Design and Methods**

Funding from the Smoking Cessation Leadership Center and Pfizer Medical Education Group will allow Aultman to reach the next levels of TOB-2, TOB-3, and finally providing TOB-4 treatment hospital-wide by December 2014. At the TOB-4 level, all discharged patients that reported using tobacco products within the past 30 days are contacted within 30 days after discharge. During this call, follow up information regarding tobacco use status is collected and additional help can be offered.

**The technical approach to achieving the goal of TOB-4 across Aultman Hospital includes:**

- Training across all medical disciplines on the importance of collecting tobacco information and how it is used
- Training for the Respiratory Therapy personnel to raise their skills in addressing tobacco use with inpatients

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- Creating new policies and procedures for each step of the tobacco treatment process for better quality
- Technology changes for new reports that will be used as task sheets for staff and physicians, as well as reports to measure progress and patient outcomes

Aultman Hospital would like to implement a similar three step model as was demonstrated by Massachusetts General Hospital. At the TOB-1 level, we have identified the technology changes necessary to be sure we are receiving smoking status on all inpatient admissions. There is currently an IT team and system in place to modify and track all information documented in our electronic records. The system, Cerner, is utilized hospital wide for all of our inpatient and outpatient charting. The IT team tracks inpatient tobacco use through the system and can report out on the percentage of inpatients that are being screened. This will ensure that we reach the goal of 100 percent of patients entering the hospital.

The next step is to run a daily report of all patients that indicated they are smokers. The report will be generated by our Cerner Team and delivered to our Respiratory Therapy Department and Certified Tobacco Treatment Specialists (CTTS). This team will deliver “Commit to Quit” bags and conduct brief tobacco treatment interventions with inpatients. During this visit, the CTTS staff could provide tobacco counseling, work with care providers for nicotine replacement therapy aids and enroll the patients in our outpatient smoking cessation classes. The case study on Massachusetts General defines a clear goal for their patients, “their goal is to ensure adequate treatment of nicotine withdrawal symptoms, encourage smokers to quit, and offer assistance to smokers who want to do so” (prevent.org, 2012). Aultman Hospital will provide the same services to patients showing interest in quitting.

The three fold system includes the last step of arranging continuous tobacco treatment after discharge. Aultman has identified the TelAsk Technology systems as the Interactive Voice Response (IVR) program to handle automated calls to patients upon discharge. With funding, we will add the IVR system to specifically call tobacco users after discharge at specific intervals to follow up with their continued treatment and cessation success. Our goal is to reach 85 percent of the total tobacco using inpatients to receive follow-up information. With the system we will be able to monitor responses from patients. This TelAsk program has been successful with Massachusetts General along with other health systems across the nation.

## Evaluation Design

**The success of the Reforming Inpatient Tobacco Treatment project will be measured using the Joint Commission performance measure standards and other existing indicators.** The PI and the IT staff will develop reports specific to identify inpatients using tobacco. This identification will then set the pace for reports necessary for each step of the tobacco measures. For example, once Aultman reaches TOB-4 implementation, we will show the number of discharged patients who are contacted within 30 days after discharge, out of the total number of discharged patients that are tobacco users. We will collect follow-up information regarding tobacco use status from these patients through the automated IVR.

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TelAsk Technologies provides a reporting component for us to generate reports directly out of the system. We will have the ability to track the patients at 14 and 30 days after discharge from the hospital and report patient's progress. **Our goal is that we will obtain follow-up information on 85 percent of the total tobacco using inpatients and our baseline quit rate will increase at least 25 percent by December 2014.** In addition to all of the Joint Commission quality measures, Aultman Hospital will also report other cessation indicators, such as participation and quit rates of our "Give It Up!" program, and the County Health Ranking statistics for Stark County.

**Additional goals are:**

- Participation in Aultman's "Give It Up!" classes will increase by at least 20 percent.
- Stark County adult smoking rate will decrease to be at or below the Ohio average by using the 2015 County Health Rankings and/or the 2015 Stark Poll.

Aultman Hospital is dedicated to sustaining the progress made through the Reforming Inpatient Tobacco Treatment project. Funding will support training and process improvements that **can be sustained for minimal operating costs going forward.** Once the process is implemented, incremental training and process revisions can continue through Aultman Hospital's operational budget.

**Project results can be quickly disseminated. Aultman Hospital is a member of the Independent Hospital Network (IHN), which consists of five hospitals in our five-county service area.** Through this network, these five hospitals meet regularly to share best practices, efficiencies, and achieve cost savings through joint purchasing strategies. Aultman will disseminate the project findings with the IHN hospitals and will use other dissemination techniques to share the project successes with the community.

**Project Timeline:**

<b>Timeframe</b>	<b>Activity</b>	<b>Responsible Parties</b>
Quarter 1, Year 1	Schedule Certified Tobacco Treatment Specialist Training, Processes will be created	Principal Investigator (PI), Mayo Clinic, IT Staff, Respiratory Therapy Staff
Quarter 2, Year 1	Process changes will be complete, technology changes will be in process and staff will be trained in the new processes.	PI and IT Staff
Quarter 3, Year 1	TOB-2 and TOB-2a will be implemented, information technology changes will be complete, measures will start to be continuously monitored	PI and IT Staff
Quarter 3, Year 1	Certified Tobacco Treatment Specialist Training will be completed	Respiratory Staff, Community members and other hospital staff.
Quarter 4, Year 1	Processes will be monitored and revised as needed	PI and IT Staff
Quarter 1, Year 2	TOB-3 and TOB-3a will be implemented	PI and IT Staff
Quarter 2, Year 2	TOB-4 will be implemented	PI
Quarter 3 & 4, Year 2	Continue evaluation and data collection. Revise policies as necessary for sustainability.	PI and IT Staff

**2013- Year 1**

Aultman Hospital already has the screening tool in place for our first step which is TOB-1, screening of all patients. In the first quarter, the principal investigator will be scheduling the time for the Mayo Clinic to come to Aultman Hospital to offer the Certified Tobacco Treatment Specialist Training (CTTS). The Respiratory Unit Director has identified three therapists that would participate in the training along with two charge nurses from our skilled nursing facility. This will increase our CTTS staff by at least five throughout the hospital. This training is a four day intensive training taught by physicians from the Mayo Clinic. In quarter one; we will create processes for the technical approach moving to TOB-4. Aultman has the information technology team in place to begin moving along our timeline.

In the second quarter, a member from the IT Staff and Principal Investigator will work together to finalize the process changes and the technology pieces will be in place to move to TOB-2 and TOB-2a. The information technology team, Kathy Hawker, Kathy Zimmer and Joe

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Miller, will be building the formats for our system to automatically generate reports on our inpatients to assist with the counseling aspect introduced in Quarter 3. The third quarter will move TOB-2 and TOB-2a into action. This step measures patients who are offered and provided treatment. At this stage all documentation will be reported to the principal investigator. Our goal of reaching four patients per day will be monitored during this phase. The increase in CTTS staff will ensure that the four patients per day goal is attainable.

In the last quarter of year one, the principal investigator and the information technology team will be monitoring outcomes and revising processes as necessary. This time will allow the CTTS staff to become accustomed with their new role and job duties, while getting acclimated to the new documentation processes. The information technology team will be able to identify the proper reporting mechanisms to complete evaluations of TOB-1, TOB-2 and TOB-2a.

## **2014-Year 2**

TOB-3 and TOB-3a will be implemented in the first quarter of year 2. Trained CTTS staff will be instrumental in the implementation of providing and/or offering treatment at discharge. At the TOB-3 phase, patients have been identified as smokers and have received counseling. In this stage we will implement treatment options for patients through either an order set through electronic records, or by a prescription at discharge. We will provide interventions for patients wishing to cease smoking. We will monitor this through the Computerized Physician Order Entry (CPOE) System and Cerner System. Our information technology team will develop reports to send to the PI and the CTTS staff that list inpatient smokers and their visitation schedule. We will ensure that patients seeking interventions will receive the necessary tools to quit.

In quarter 2, year 2, Aultman will implement the final phase of the Joint Commission measures, assessing patients after discharge. TOB-4 is assessing the tobacco status of patients after they are discharged. Mrs. Elton will design questions that can be asked to identify smokers via an automated calling system. The system will call patients within 14 days of discharge. In order to track appropriate follow-up, Aultman will also call the patients again 30 days after discharge. These questions will walk the patient through their smoking status and if they wish to seek additional help to quit. The numbers will prompt reports to be generated for the PI and program facilitators. The information will also be shared with the "Give It Up!" program facilitators. "Give It Up!" is a free six-week series of tobacco cessation classes. In addition, Aultman will monitor and track the "Give It Up!" participation and their quit rates through the class to complete the circle of tobacco cessation.