

Community Health Centers

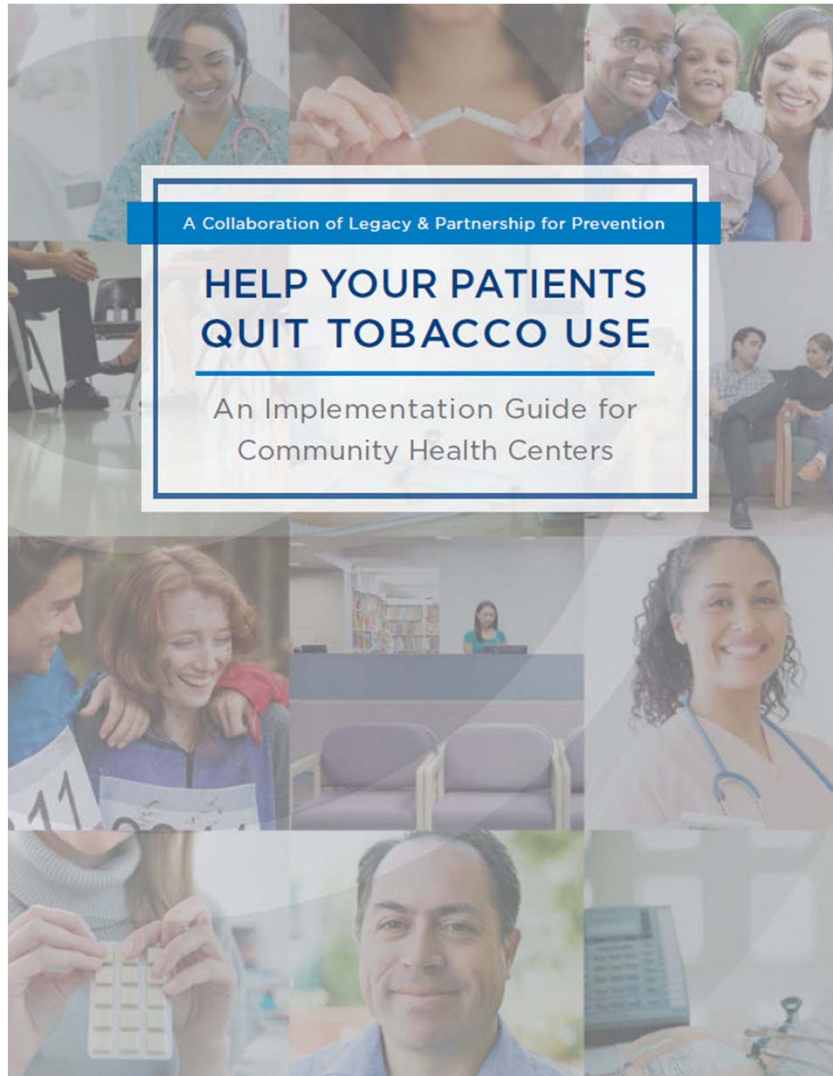
“Helping Your Patients Quit Tobacco Use”

November 21, 2013
2-3:30pm (ET)

Dial-in: 866-239-5474



New Tobacco Cessation Implementation Guide



Available for free download at
www.actiontoquit.org
and
www.legacyforhealth.org



Housekeeping

- All phone lines will be muted.
- Please do not put your phone on hold.
- The webinar is being recorded. You will be notified when the recording and slides are available for download.
- Questions are encouraged throughout the webinar. Feel free to type a question/comment using the Chatbox function. Questions will be answered at the end of the webinar during the Q/A segment.

Presenters

- **Dr. Michael Fiore**, Professor and Director, University of Wisconsin Center for Tobacco Research and Intervention
- **Dr. Donald L. Weaver**, Associate Medical Officer, National Association of Community Health Centers
- **Dr. Matthew Horan**, Dental Director, Codman Square Health Center in Dorchester, MA
- **Laura Chisholm**, Self-Management Technical Lead, Public Health Division/Oregon Health Authority

Introducing...



Michael C. Fiore, MD, MPH, MBA

Professor of Medicine and Director
Center for Tobacco Research and
Intervention

University of Wisconsin School of
Medicine and Public Health

Addressing Patient Tobacco Use

Has healthcare in the USA made progress?

Addressing Patient Tobacco Use

Are health systems acting in accord with the 2008 PHS guideline?

- What are we doing well?
- Where is additional progress needed?

Why are screening rates so much higher than treatment rates?

How can we make treating tobacco dependence a higher clinical priority in the US?

Addressing Patient Tobacco Use

Why are low income populations that receive their healthcare at community health centers one of the most important audiences for tobacco cessation interventions?

Introducing...



Donald L. Weaver, MD

Associate Medical Officer
National Association of
Community Health Centers

Introducing...



Matthew Horan, DMD

Dental Director
Codman Square Health
Center (Dorchester, MA)



Codman Square
Health Center

Implementation of Oral Health Quality Improvements: Tobacco Cessation

Matthew Horan, DMD
Dental Director

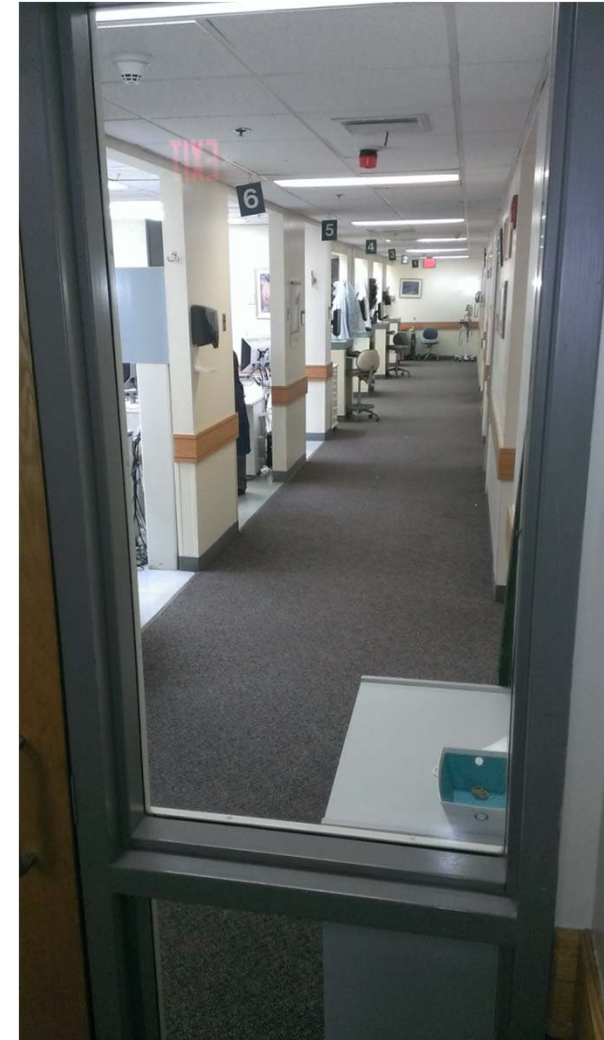


Tobacco Cessation:



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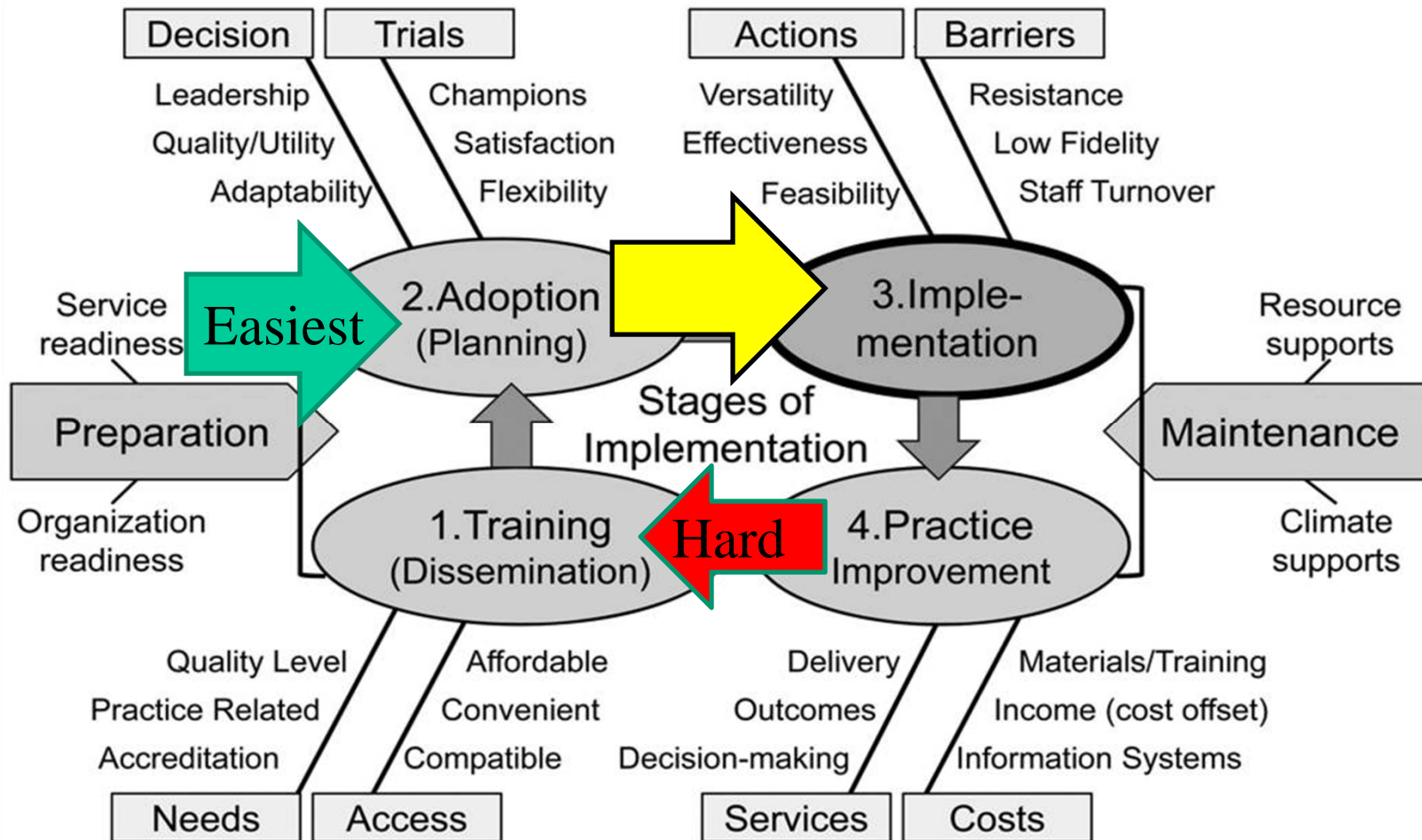
- Why the Dental Setting?
 - Overall health motivation
 - Preventable- oral cancers, periodontal disease, death
 - Motivators...esthetic concerns of the patient – early tooth loss, \$\$
 - Built-in follow-ups during treatment plan visits
- Aren't we doing it already?
 - Consistency, documentation, and follow-up quality



“Implementation Cycle”:



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D. Dwayne Simpson, Ph.D.

“A Framework for Implementing Sustainable Oral Health Promotion Interventions” J Public Health Dent.
2011 Winter . 71(s1)S84-S94

Preparation + Adoption:



- Approached by the Mass. League of Community Health Centers with questions and a basic idea
- Escalated to Performance Improvement Committee with a Charter identifying project lead, team, opportunity statement, expected outcomes, measures, reporting plans, methodology, and PCMH incorporation

Training:



- Evidence-based, high quality, convenient
- Lead by UMass Medical School program and facilitated by the Mass. League
 - Basic training for all staff
 - Potential Barriers – time and clinical demands
 - Train-the-trainer – selected staff
 - Interested and motivated staff
 - These staff become your mini-champions

Implementation:



- Trainings completed and barriers identified
- Charter for improvement shared with team
- Department protocol established and EHR modifications shared
- Process reinforced at daily huddles
- Measures shared with Mass League and oral health team
- *Maintenance, improvements, and repeat*

EHR Changes:

- Pick things you already know how to change – requiring minimal or no IT/IS support
- Always think about the process goal and what you are trying to measure /report

Medical History Review

Medical Alerts: **Tobacco Use History

Medications: *NO MEDICATIONS

Allergies: *No Known Drug Allergi

Since Last Visit:

Medical Alerts: ☐ No Change ☒ Change

Medications: ☒ No Change ☐ Change

Allergies: ☒ No Change ☐ Change

Pain Level:

0 1 2 3 4 5 6 7 8 9 10

Description:

ID2x, BP 120/80 p65

OK Cancel

Dentrix Chart - (TEST, PATIENT) [CODMAN] [759] [00083808]
File Options View Prim/Perm Procedures Multi-Codes Dental Diagnostics Help

Select Procedure Code

Code	Description
*Disc	Pt Discontinued
*Phs1	Phase 1 Complete
*Phs2	Phase 2 Complete
D1320	Tobacco counseling
DenTx	Pt denied cessation support/ref
InHCo	Pt ref to in-house counselor
MaryJ	Marijuana User
NERBL	NERB Lesion
NonSm	Non-smoker
OnRxs	Pt on/given pharmacotherapy
OtRes	Pt ref other resources/handouts
QWork	Pt ref to Quitworks

OK
Cancel

	EO	Ex	Tx	Comp	+
Clear					

Date	Tooth	Surf	Proc	Prov	Description	Stat	AP	Amount
					Allergies: No Change			
					Pain Level: 0			
					Description:			
11/09/2013				759	Clinical Note			
					Medical Alert: *Alcohol Abuse			
					*Depression			
					*None- No Contraindications			
					Medications: *NO MEDICATIONS			
					Allergies: *No Known Drug Allergies			
					Since Last Visit: Medical Alert: No Change			
					Medications: No Change			
					Allergies: No Change			
					Pain Level: 0			
					Description: 2xid.			
					B.P:			
					P:			

☒ Treat Plan
☒ Completed
☒ Existing
☒ Conditions
☒ Exams
☒ Proc. Notes
☒ Clinic Notes

(X) Current User: Cigarettes; 1 packs per day; 15 years of use							
Prescriptions:							
NICODERM CQ 21 MG/24HR PT24 (NICOTINE) 1 patch to skin daily (remove patch after 24 hours) #1 box x 3							
NICORETTE 4 MG GUM (NICOTINE POLACRILEX) 1 piece chewed then hold between gums and inner lip. May use every 1-2 hours as needed for nicotine craving (max 20 pieces/day) #1 box x 3							
11/18/2013		D0120	759	Periodic oral evaluation	C		46.00
11/18/2013		D0274	759	Bitewings-four films	C		66.00
11/18/2013		D1320	759	Tobacco counseling	C		0.00
11/18/2013		OnRxs	759	Pt on/given pharmacotherapy	C		0.00



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- Dummy codes
 - A great way to track outcomes/measures
 - Our providers were already doing the billing so minimal additional training was required
 - Measures can be extracted at anytime by running a “productivity” report with the dummy codes

QUITWORKS

A Service of the Massachusetts Smokers' Helpline

A Collaboration of the Massachusetts Department of Public Health and Massachusetts Health Plan

- If a tobacco user is interested in quitting smoking, fill out this form with them.
- Fax completed form to 1-866-560-9113.
- The Massachusetts Smokers' Helpline will contact the tobacco user, offer free cessation services and send feedback reports to the provider listed below.
- This program is free for all Massachusetts residents regardless of insurance status.

Patient Stamp, Label or Info (Name, Record Number/DOB, Date)



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Massachusetts Referral Form

Tobacco Users: Complete this section

MR. PATIENT TEST		Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	
First Name Last Name			
<u>1500 LALA LANE</u>		<u>DORCHESTER, MA 02124</u>	
Mailing Address		City	State Zip
()			
Phone Number			
When Should we call? (check all that apply) <input type="checkbox"/> Morning		<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening <input type="checkbox"/> No Preference
Language Preference: <input type="checkbox"/> English <input type="checkbox"/> Spanish		<input type="checkbox"/> Other (specify)	
May we leave a message? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Primary Insurance <input type="checkbox"/> Blue Cross Blue Shield MA		<input type="checkbox"/> Tufts Health Plan	<input type="checkbox"/> Harvard Pilgrim
Of Tobacco User: <input type="checkbox"/> MassHealth/Medicaid		<input type="checkbox"/> Other	<input type="checkbox"/> None
I authorize this provider to release the information on this enrollment form to QuitWorks so that I may be contacted and participate in the QuitWorks program. I also authorize QuitWorks to disclose information about my progress in attempting to quit smoking to the health care provider listed on this form.			
Tobacco User's Signature		Date	

Health Care Providers: Complete this section

Referring Provider:	<u>Dr. Matthew Horan</u>	Phone Number	<u>(617) 822-8142</u>
Facility:	<u>Codman Square Health Center</u>	Fax Number	
Address:	<u>637 Washington St. 2nd Floor Dental Dept., Dorchester, MA 02124</u>		<u>(617) 822-8148</u>
Send feedback report to:			
Same as			
<input type="checkbox"/> above	or	<u>Matthew Horan, D.M.D. (same address above)</u>	<u>(617) 822-8148</u>
	Name	Phone Number	Fax Number
PEDIATRICS ONLY:			
Tobacco User's relationship to child: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other (specify)			
Child/Children's name: (to help with record keeping)			

Copies of this form may be downloaded at WWW.QUITWORKS.ORG

Fax this form toll-free to 1-866-560-9113

Sample "Quitworks"
Referral Form
- Automatically
populated by EHR

Measures:



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TABLE: Percentage of Patient Visits Where Screening Was Performed Per Month

CHC	March	April	May	June	July	August	Sept	Oct	Nov	Dec	Jan
BHCHP		90.00%	77.86%	47.53%	54.96%	58.43%	53.49%	69.19%	73.51%	19.29%	78.57%
Codman	87.10%	73.25%	59.52%	73.78%	47.09%	67.79%	61.22%	65.69%	73.65%	77.94%	72.00%
Dimock				32.36%	51.16%	56.03%	51.16%	38.32%	37.77%	16.55%	29.58%
Fenway			6.19%	17.72%	60.87%	73.47%	36.44%	35.14%	54.72%	120.16%	101.29%
Geiger Gibson			100.00%	121.43%	118.55%	101.10%	63.43%	57.55%	44.03%	44.12%	41.86%
North End		59.26%	43.66%	33.33%	27.51%	32.72%	35.68%	43.23%	39.02%	34.71%	37.85%
South Cove		81.46%	81.94%	81.11%	91.52%	81.33%	82.69%	80.77%	82.69%	80.51%	82.83%
South End		24.87%	69.80%	100.00%	70.82%	100.00%	100.00%	89.43%	93.19%	84.46%	83.90%
Whittier		3.78%		25.57%	36.49%	76.64%	58.88%	17.99%	19.42%	18.25%	18.24%

Mass. League Summary Table – S. Wells.
Jan 2012



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Health Center

Community Health Center	% of Tobacco Screenings Completed based on Opportunities for Tobacco Screenings	Total # of Tobacco Screenings Performed	Total # of Targeted Opportunities for Tobacco Screenings
BHCHP	62.36%	971	1557
Codman	68.63%	1965	2863
Dimock	39.35%	1805	4587
Fenway	62.57%	1207	1929
Geiger Gibson	78.41%	944	1204
North End	38.90%	1143	2938
South Cove	82.61%	4766	5769
South End	73.60%	1921	2610
Whittier	23.92%	1510	6314

Mass. League Summary Table – S. Wells

Other Barriers...



- Met with other directors from participating CHCs along the way- facilitated by ML
 - Non-standardized denominator
 - Quitworks referrals– outside source to confirm
 - Training time
 - Electronic versus paper charts
 - Administrative time
 - **How do we prevent a loss of momentum?**
 - **How to make this part of our standard of care?**

Maintenance + Improvements:



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- Staff utilizing the full extent of their education and delegable duties
 - Dental Assistants, Dental Health Workers
- Positive Reinforcements
 - provider annual performance evaluation under professional standards and job-specific review
 - “provider report card” – a dashboard
 - Provider incentive plan - quality focused
 - *Future staff-wide quality incentives*



Provider Monthly Review

Productivity between 9/1/2013 and 9/30/2013

Sample "Report Card"

Typical CHC Measures

Productivity by Visits					Productivity by Revenue						
	Cumulative Actual Visits	Cumulative Work Days	W/M	Monthly Goal	Charges, \$	Collections, \$				Collections, %	Average Visit Charge
						Deposits (Pre-treatment)	Patient Pymt (Post-treatment)	Insurance Pymt	Total Collections		
Oct	178	23	127%	140	38825.00	0.00	2788.23	14638.98	17427.21	45%	218.12
Nov	195	21	152%	128	49936.00	100.00	3701.06	18227.38	22028.44	44%	256.08
Dec	142	20	116%	122	41817.00	0.00	2971.74	14574.99	17546.73	42%	294.49
Jan	199	21	155%	128	63105.00	100.00	4508.12	19794.44	24400.56	39%	317.11
Feb	191	20	157%	122	60007.00	45.00	8300.53	20577.59	28923.12	48%	314.17
Mar	261	21	204%	128	78032.00	100.00	5326.15	28030.60	33456.75	43%	298.97
Apr	231	22	172%	134	83982.00	474.00	2575.64	33320.94	36370.58	43%	363.56
May	180	22	134%	134	66381.00	0.00	3140.44	22535.09	25675.53	39%	368.78
Jun	205	20	168%	122	72566.00	300.00	4104.66	15859.96	20364.62	28%	354.13
Jul	230	22	172%	134	77378.00	0.00	1768.51	11272.99	13041.50	17%	336.43
Aug	222	22	166%	134	82366.00	197.00	6608.81	9418.20	16224.01	20%	371.02
Sep	220.00	20.00	1.80	121.89	61274.00	0.00	2322.62	1463.71	3786.33	6%	278.52

	Phase I Completions		Phase II Completions		Tobacco Screening		Prophylaxis-Adult		Initial Exam	Periodic Exam
Oct	0%	0	0%	0	0%	0			37	12
Nov	0%	0	0%	0	2%	1			35	16
Dec	0%	0	0%	0	0%	0			22	13
Jan	0%	0	0%	0	0%	0			36	16
Feb	16%	9	4%	2	16%	9			40	17
Mar	0%	0	0%	0	0%	0			0	0
Apr	135%	31	43%	10	48%	11			0	23
May	83%	25	13%	4	3%	1			0	30
Jun	82%	23	7%	2	64%	18			0	28
Jul	88%	43	14%	7	88%	43	0%		15	34
Aug	96%	47	4%	2	80%	39	16%	8	11	38
Sep	71%	32	9%	4	78%	35	0%		14	31

Compliances Due

Dental License	3/31/2014
Performance Evaluation	9/4/2014
Mandatory	2/20/2014
TB Eval Due	9/11/2014
N95	10/19/2012
CPR	8/17/2014

Action Plan:

Future...



- Advocate with the Mass. League of Community Health Centers for Mass Health to cover D1320 – Tobacco counseling
- Refresher trainings
- Annual staff competency?
- Group visit with medicine? Return of in-house counselor on the medical side?
- Dental EHR and Medical EHR exchange

Thank you.



Questions?

matthew.horan@codman.org

Introducing...



Laura Chisholm MPH, MCHES

Self-Management Technical Lead
Public Health Division/Oregon
Health Authority

Tobacco Cessation in Community Health Centers: A State Health Department Perspective

Laura Chisholm, MPH, MCHES
Self-Management Technical Lead

Partnership for Prevention / American Legacy Foundation Webinar
November 21, 2013



PUBLIC HEALTH DIVISION
Health Promotion and Chronic Disease Prevention

Presentation Objectives

- Describe a public health / CHC partnership to establish delivery system changes to support cessation

Oregon CHC Patient Self-Management Collaborative: Multnomah County Case Study

- Describe project aims and process to date
- Successes
- Challenges & lessons learned
- Future implications

OHA Health Promotion and Chronic Disease Prevention Section (HPCDP)

Mission: advance policies, environments and systems that promote health and prevent and manage chronic diseases



Vision: All people in Oregon live, work, play and learn in communities that support health and optimal quality of life

PUBLIC HEALTH DIVISION
Health Promotion and Chronic Disease Prevention

Oregon
Health
Authority

Tobacco Cessation and Chronic Disease

- Tobacco use is the major modifiable cause of chronic disease
- Oregon's approach includes prevention, early detection and **self-management**
- Self-management = *knowledge, skills and self-efficacy to:*
 - Manage the condition(s)
 - Stay engaged in life
 - Handle emotional fallout
- Self-management supports tobacco cessation
 - Common territory: self-efficacy, goal setting, problem solving

Tobacco Cessation in CHCs: Oregon's Perspective

- Low income populations bear a higher burden of tobacco use
- CHCs see the effects of tobacco every day
- Oregon Public Health Division contributes:
 - Best practices
 - Community resources to support clinical practice
- Oregon Primary Care Association (OPCA) contributes:
 - Relationship with clinics & providers (cultural competence)
 - Clinical systems change expertise

Patient Self Management Collaborative

Objectives

- Enhance in-clinic self-management support
- Develop / refine referral systems to self-management resources
 - Oregon Tobacco Quit Line
 - Stanford Chronic Disease Self-Management Programs
- Identify how to measure progress and what works
- Spread promising practices

Roles

- OPCA: manage and coordinate
- OHA: funding, guidance, best practices & evaluation resources

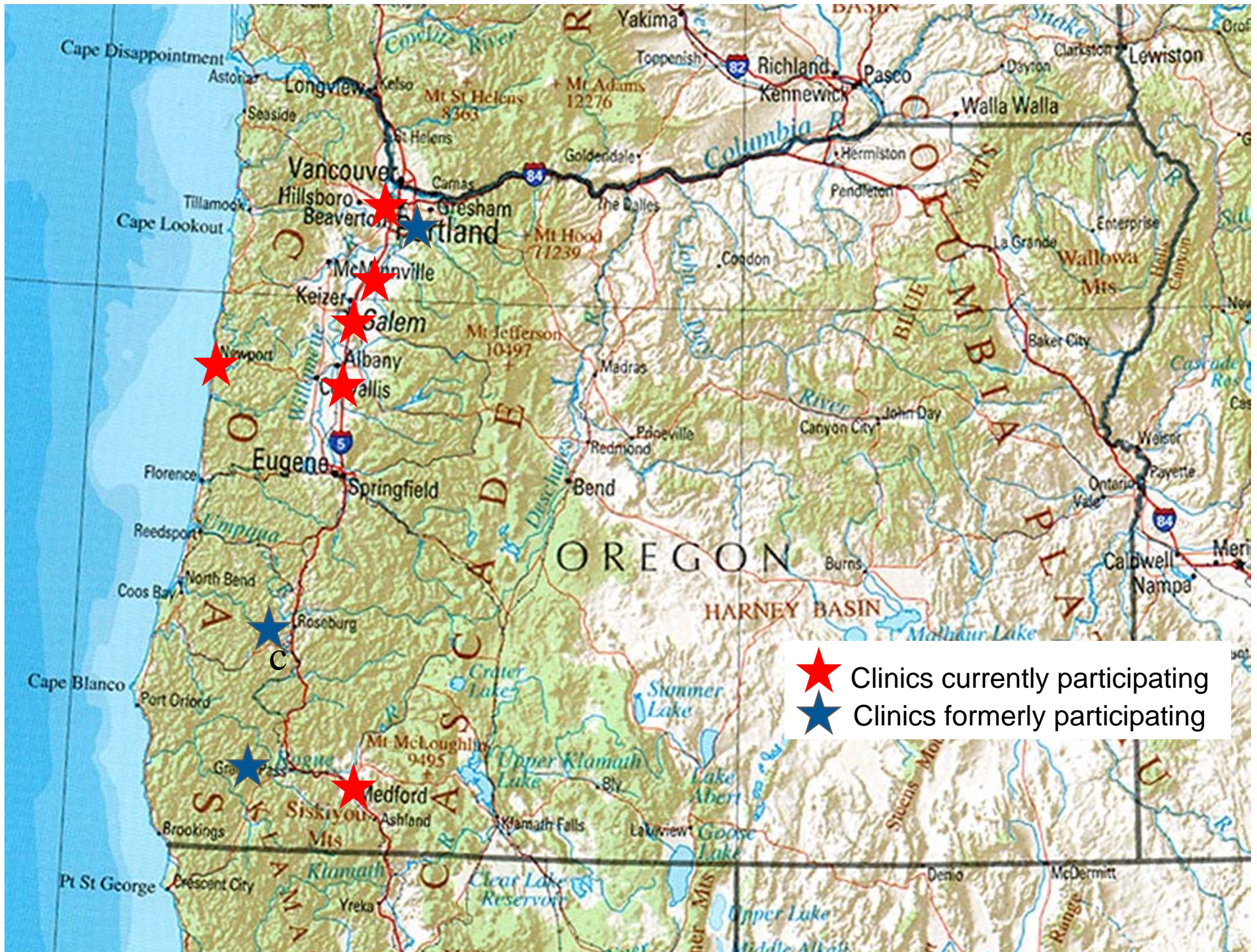
How the Collaborative Works

Collaborative learning model

- Multidisciplinary clinic care teams
- Practical and interactive – PDSA cycles
- Peer learning

Clinic teams receive training and technical assistance

- Self management resources and skills
 - Motivational Interviewing
- Clinical process improvement
 - Tools: Patient-Centered Visit form (Mauksch), PAM
 - Building S-M supports and referrals into clinic flow
 - PCRS (Assessment of Primary Care Resources & Supports for S-M)



Elements of Clinical Cessation Support

- Adjusted protocols and practice flows
 - In-clinic assessment for tobacco use
 - Counseling and/or Quit Line referral
 - Documentation in EMR
- Post-visit follow-up (“closed-loop referral”)
- Data collection, reporting and ongoing process improvement



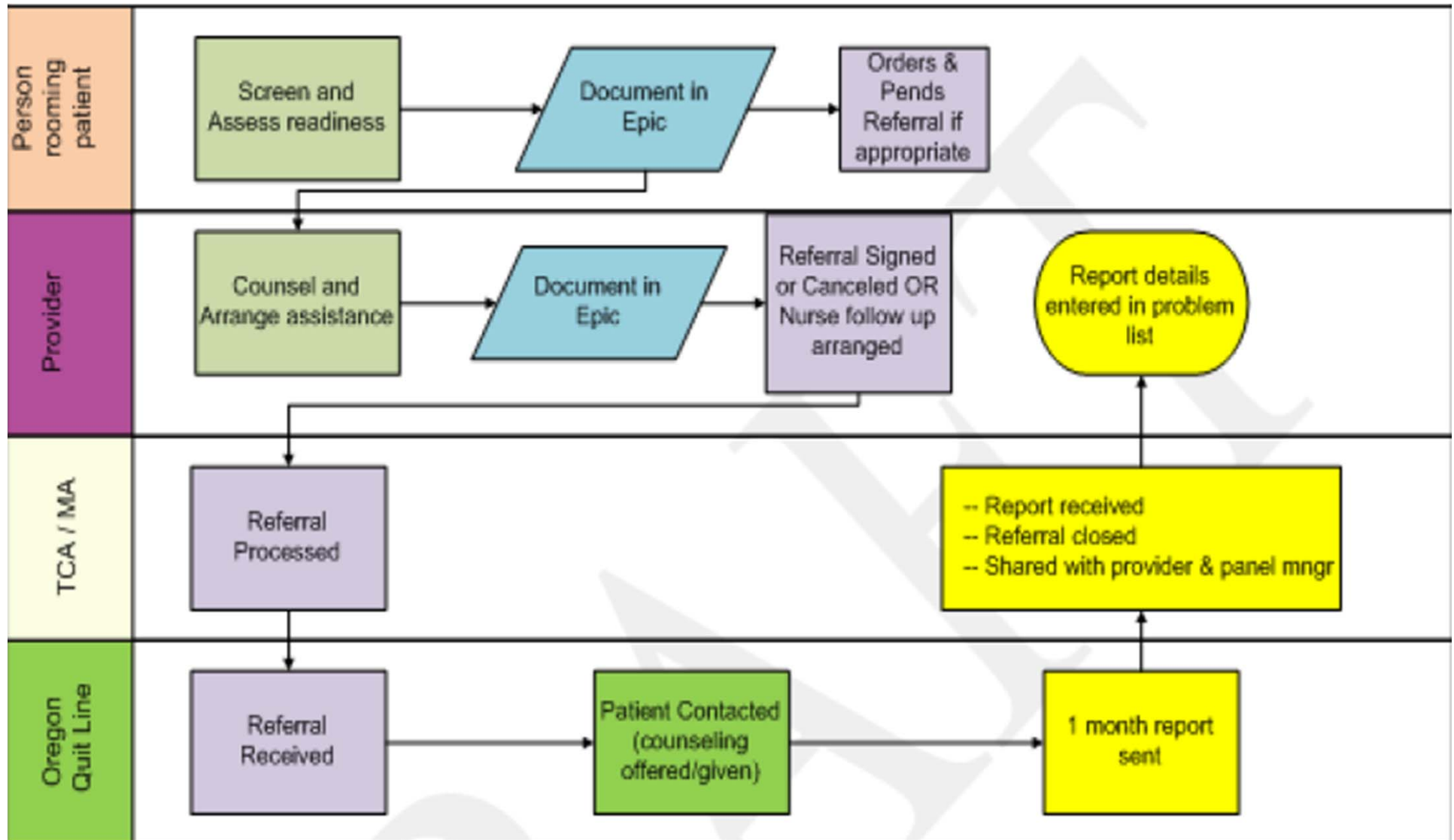
Quit Line Referral System Advantages From a Clinic Perspective

- Fills clients' need for cessation support
- Relieves pressure on providers & clinic staff
- Fulfills Meaningful Use reporting requirements
- Supports medical home accreditation
 - NCQA and state incentive programs

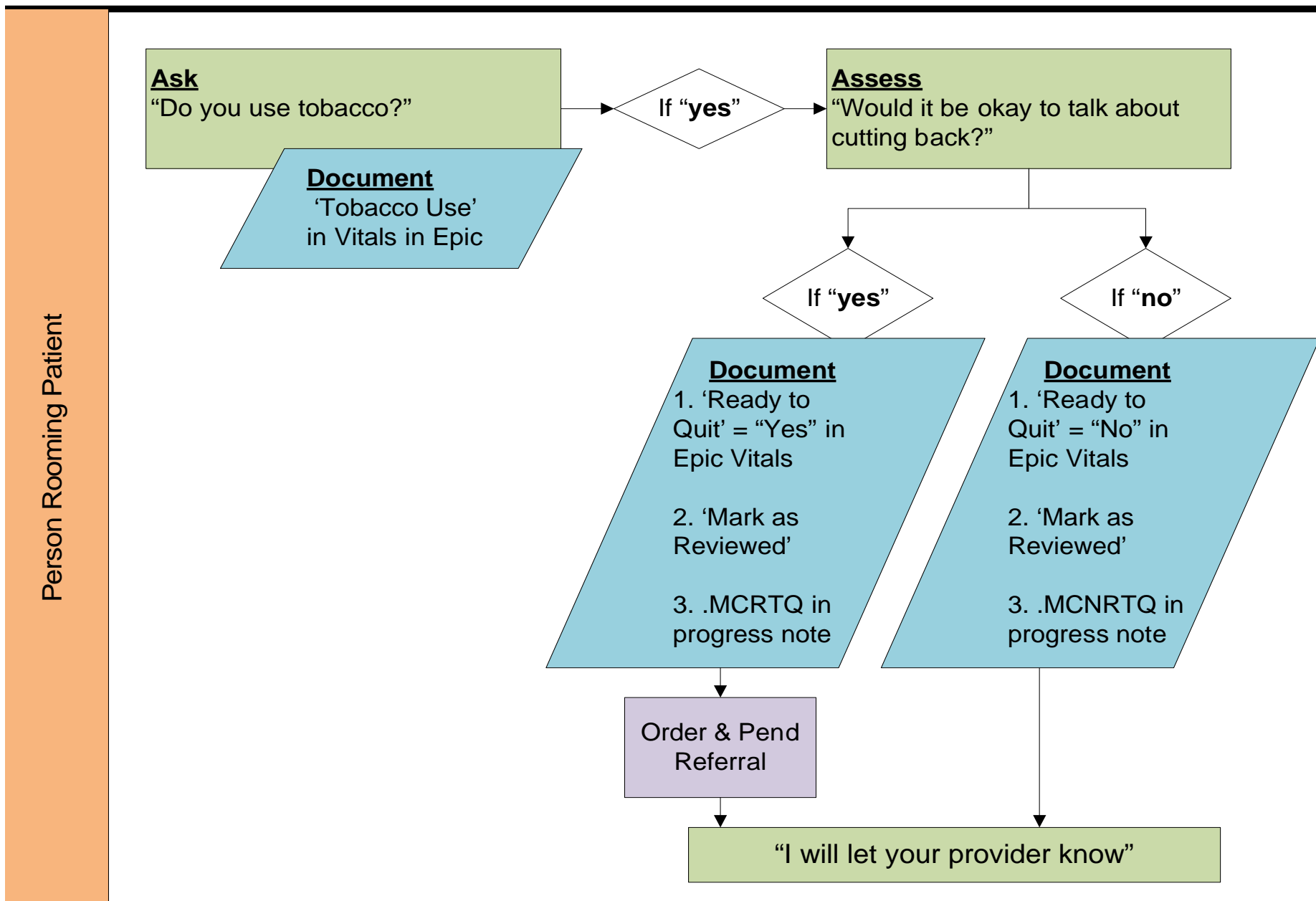


Multnomah County Clinics

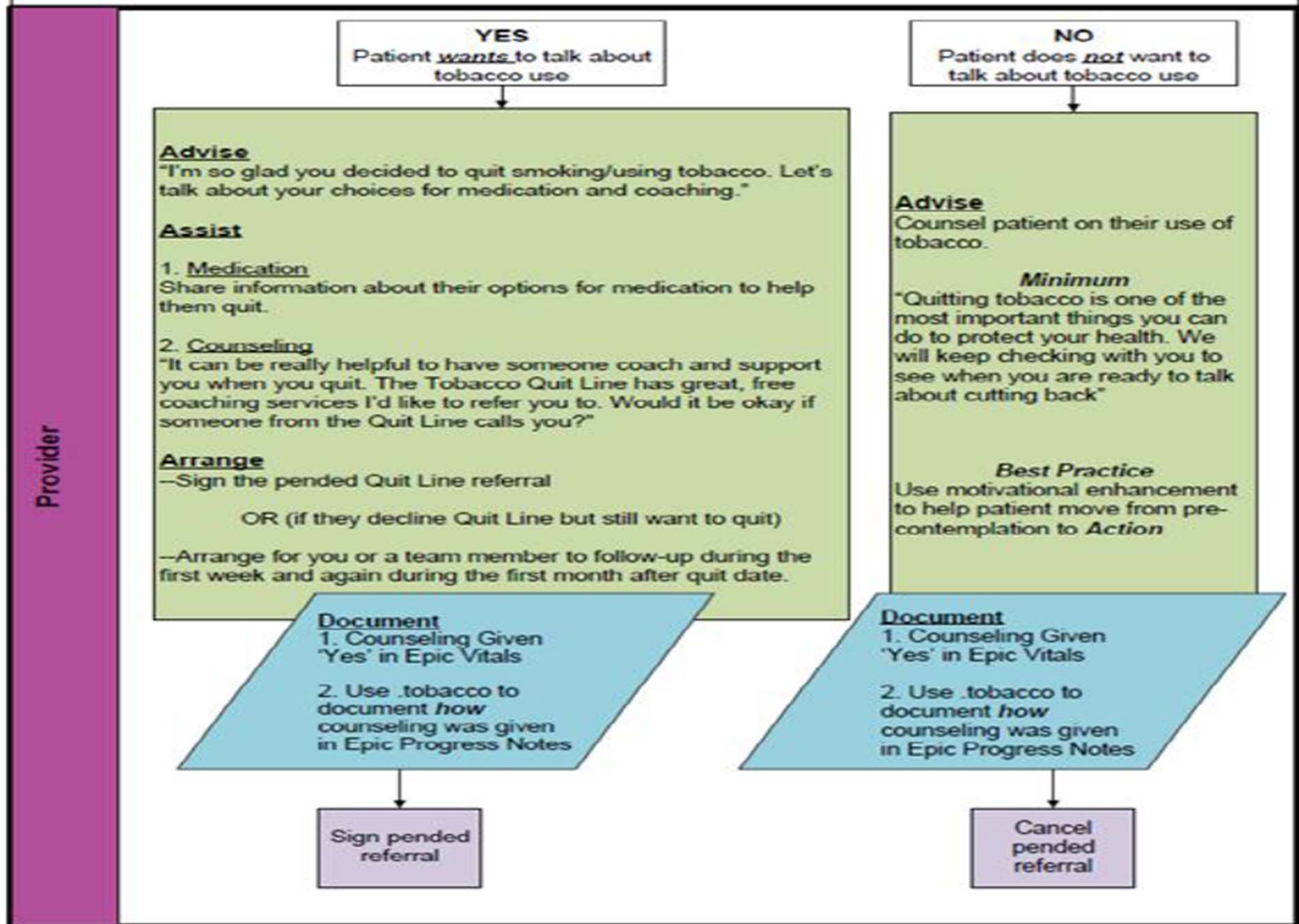
Cessation Counseling and Referral Workflow



Tobacco Cessation Referral and Counseling Details (Step 1)



Tobacco Cessation Referral and Counseling Workflow (Step 2)



Case Study:

Multnomah County Health Department

- **Results:**

- Tobacco use screening: 68% in 2011; 82% August 2013
- Counseling for TUs at last visit: 10% January; 27% August 2013
- More than 1,000 total Quit Line referrals in 2013

- **Challenges:**

- Cumbersome to print, fax, enter info into EHR
- Need to close the referral loop
- Clients run out of mobile phone minutes
- Quit Line utilization numbers are still low

Case Study:

Multnomah County Health Department

Future QI work to improve QL utilization:

- Ensure Quit Line gets correct client contact numbers
 - Capture multiple numbers in EHR
 - Indicate best number in next 72 hours
- Follow up with referred clients who didn't respond
 - Outbound calls from Quit Line
 - Attempt to contact non-responsive referrals from last six months
- Identify if referrals are appropriate

Lessons Learned

- **Find the right messenger**
- **Recruit clinics with high readiness and interest**
- **Involve staff at all levels**
 - Meet practice team members at their level of comfort
- **Gain traction through Meaningful Use and medical home initiatives**
- **Expect that change takes time and dedicated resources**



Questions?

Laura Chisholm, MPH, MCHES
Self-Management Technical Lead
Health Promotion & Chronic Disease Prevention
Oregon Public Health Division
laura.f.chisholm@state.or.us

CHC cessation support and Quit Line referral workflows:

www.smokefreeoregon.com/resources/quit/quit-resources

Question and Answers

Do you have a question or a
comment?



If so, type it into the Chatbox at the
bottom right hand corner of your
screen.



Additional Items

Do you have additional questions for our speakers?
Please send questions/comments to Kristen Tertzakian
at ktertzakian@legacyforhealth.org.

Stay connected

Sign up for ActionToQuit listserv:

www.actiontoquit.org

and

Legacy's e-newsletter: www.legacyforhealth.org

Thank You

