

# **American Academy of Family Physicians Office Champions Tobacco Cessation National Dissemination Project**

## **Final Report**

January 31, 2013

This project was supported by Pfizer Inc



# Office Champions Tobacco Cessation National Dissemination Project

## Project goals

To recruit and train Office Champions in 50 family medicine practices to provide leadership in implementing tobacco cessation systems change and activities in their offices. To meet or exceed the results of the 2011 Office Champions Pilot Project and expand the project to 50 additional family medicine practices.

## Overview of the project

The U.S. Public Health Service (USPHS) Clinical Practice Guideline, *Treating Tobacco Use and Dependence, 2008 update*, calls on clinicians to change the clinical culture and practice patterns in their offices to ensure that every patient who uses tobacco is identified, advised to quit and offered scientifically sound treatments. To facilitate that change in family medicine offices, the AAFP expanded the successful Office Champions Tobacco Cessation Pilot Project to an additional 50 practices to encourage and teach Office Champions how to implement system changes to integrate tobacco cessation activities into their daily office routines.

The quality improvement project was built on the AAFP's successful Ask and Act program. Ask and Act encourages family physicians to ASK their patients about tobacco use, then to ACT to help them quit. Through the Ask and Act program, AAFP members have access to a variety of resources to help patients quit using tobacco.

## Practice Recruitment

Practice recruitment efforts began in March 2012 with a call for applications for the project. Fourteen states with an adult smoking prevalence rate of 20 percent or greater were targeted in the recruitment efforts, but other states were selected as well. The project announcement was distributed to the following:

- AAFP members and constituent chapters
- Ten medical publications
- Members of the AAFP National Research Network
- Social media outlets, including Twitter, Facebook, and AAFP President Jeff Cain's blog
- Tar Wars, Ask and Act, and the Association of Family Medicine Residency Directors' listservs

"The project provided us with the unique opportunity to refocus our attention on strengthening and expanding our tobacco cessation-related initiatives. The resources provided by the AAFP complemented our existing program very well. Thank you for including us. It was a valuable experience!"

-2012 Office Champion participant

To be considered for the Office Champions Project, practices had to agree that their:

- Office Champion would complete the Office Champions training program, including an online course, Collaborative Institutional Training Initiative (CITI) course on Human Research Subjects, attend a teleconference, and review a practice manual.
- Office Champion or Physician Champion would present an overview of the Office Champions Project to the practice's physicians and staff at a staff meeting in June 2012.
- Office Champion would complete a pre- and post-project review of 20 random patient charts, following parameters distributed during the course of the project.
- Office Champion would identify and implement system changes to better integrate tobacco cessation activities into daily office routines and to create a culture that encourages tobacco cessation.
- Office Champion would be allocated adequate time, resources, and support to fulfill the responsibilities of the Champion role.
- Practice would participate in all phases of program evaluation.

*"I felt the project was beneficial, and we can build on this process, not just for smoking cessation but for other QI projects as well."*

*-2012 Office Champion participant*

Along with recruiting practices through emails and social media, project staff exhibited at AAFP chapter meetings and national conferences to attract additional applicants. Project information and materials were also shared and disseminated at additional chapter meetings and national conferences after participating practices were selected.

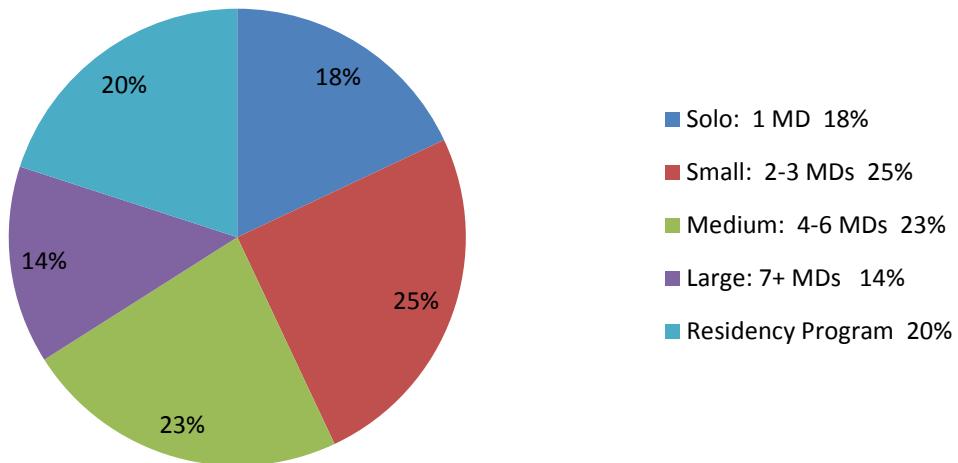
In all recruitment materials, practices were made aware that along with the free training and tobacco cessation materials, if they completed all project requirements they would receive \$2,000 to help defray administrative costs, along with recognition in an ad in *American Family Physician*, recognition on the AAFP website and in materials distributed at AAFP conferences. In addition, practices that completed the project would also receive recognition items to include:

- A certificate for their Office Champion and practice indicating they are recognized by the American Academy of Family Physicians for Excellence in Tobacco Cessation
- A press release to send to their local newspaper
- An article for their patient newsletter
- Electronic "Recognized for Excellence in Tobacco Cessation" logos to use on electronic and printed publications
- Tips on publicizing their project completion and champion status along with tips for holding a recognition ceremony for staff

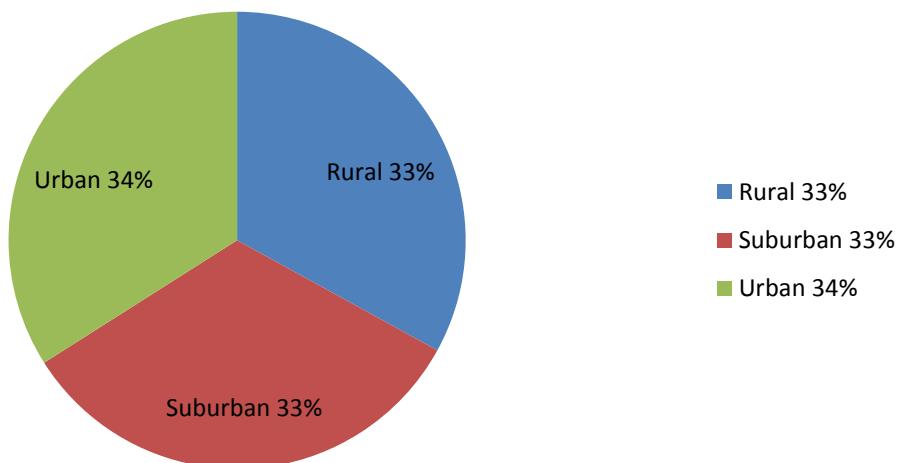
One hundred and ten applications were received. Fifty practices were selected to ensure a wide geographic representation, with a range of practice types and sizes, and a variety of practice settings. Twenty-nine of the fifty selected practices were from states which have an adult smoking prevalence rate of 20% or higher. The selected practices were announced in May 2012, project training took place in June 2012, and project implementation began July 1, 2012, and concluded November 30, 2012. (Note: Forty-nine practices completed the project. All information in this report is based on those forty-nine practices).

## Demographics

### Size of Selected Practices



### Setting of Selected Practices



The Office Champions project spanned 12 months. Practices participating in the project designated an Office Champion to lead the project and communicate results to the AAFP, and a Physician Champion to ensure that the Office Champion received physician and staff support during the project.



Pamela Rodriguez, CAE, presenting the Office Champions poster at the National Conference on Tobacco or Health

## Project Timeline

March/April 2012: Recruitment of practices  
 Chapter meetings – recruitment and exhibit  
 Recruit Office Champion mentors  
 Make final updates to materials, online training and resources

May 2012: AAFP Annual Leadership Forum/National Conference for Special Constituencies – recruitment and exhibit  
 Applications due and practices selected and announced  
 Materials mailed to the selected practices

June: Training teleconferences held and project training requirements completed by participating practices  
 Implementation plans and pre-implementation chart review due  
 Chapter meetings – exhibit and disseminate materials

July: Begin implementation  
 First payment to practices for completing training requirements  
 Chapter meeting – exhibit and disseminate materials

August/September/  
 October: Ongoing technical assistance  
 Optional teleconferences held  
 National Conference on Tobacco or Health (NCTOH) – present poster, exhibit and disseminate materials  
 AAFP Scientific Assembly – exhibit and disseminate materials

November: Ongoing technical assistance  
 Implementation complete at the end of November

December: Post-Project Chart Review and evaluation surveys due  
 Second payment to practices for completing all requirements  
 Recognition items sent to all practices  
 Project materials sent to non-awardees, advisors and chapters

## Office Champions by job title

The Office Champions held a variety of roles in their practices including Registered Nurse, Licensed Practical Nurse, Medical Assistant, Physician, Patient Care Coordinator, Chief Resident, Research Coordinator, Pharmacist, Nurse Practitioner, Quality Improvement Manager, Clinical Manager, Medical Home Coordinator, Health Promotion Program Manager, Billing Manager, Project Director and Care Management Coordinator.

## Project Materials

In May, each practice was sent a package of project materials that included:

- Treating Tobacco Dependence Practice Manual
- Integrating Tobacco Cessation into Electronic Health Records (EHR) document
- Patient education brochures
- Secondhand Smoke brochures
- Posters
- “Quit Smoking” prescription pads
- Medicare Part B Benefits for Smoking and Tobacco Cessation Counseling document
- Quitline referral cards
- Group Visit Guide
- Pharmacologic Product Guide: FDA-Approved Medications for Smoking Cessation
- Coding Reference document
- Stop Smoking Guide
- “Quit now, Ask us how, Be tobacco-free” lapel pins



Posters and patient materials were available in both English and Spanish.

A Tip Sheet was emailed to all Physician Champions in June, noting ways they could support their Office Champion and help to ensure successful implementation. Three Office Champions from the Pilot Project agreed to act as mentors to the current Office Champions. The mentors participated in the teleconferences and were available for the duration of the project to answer questions and provide support and feedback to the Office Champions.



**Treating Tobacco Dependence Practice Manual**  
*Build a Better Office System*



**ASK AND ACT**  
A TOBACCO CESSATION PROGRAM

## Office Champions Training

Office Champions were required to review the Treating Tobacco Dependence Practice Manual, complete an online training program, review and report data from 20 patient charts, submit their practice's implementation plan, and have a meeting with their clinic staff during the month of June. Practices were also required to participate in one of three mandatory teleconferences. Sarah Mullins, MD, member of the AAFP's Tobacco Cessation Advisory Committee and Office Champion for her family medicine practice during the 2011 Pilot Project, provided an overview on systems change strategies. A Pilot Project Office Champion mentor also participated in each teleconference, sharing his/her experiences and best practices. Staff followed up with specifics on how to implement the project and details on expectations and deadlines. The teleconferences ended with a question and answer session.

*"Resources were extremely helpful in educating patients, physicians and office staff"*

*-2012 Office Champion participant*

## Pre-Project Chart Review and Implementation

The pre-project chart review was due at the end of June. Office Champions were asked to begin early the week of June 25 and pull and enter data from the first 10 patients over the age of 18 that the clinician saw on one day, then follow the same process for the following day. For each chart they pulled, they answered the questions:

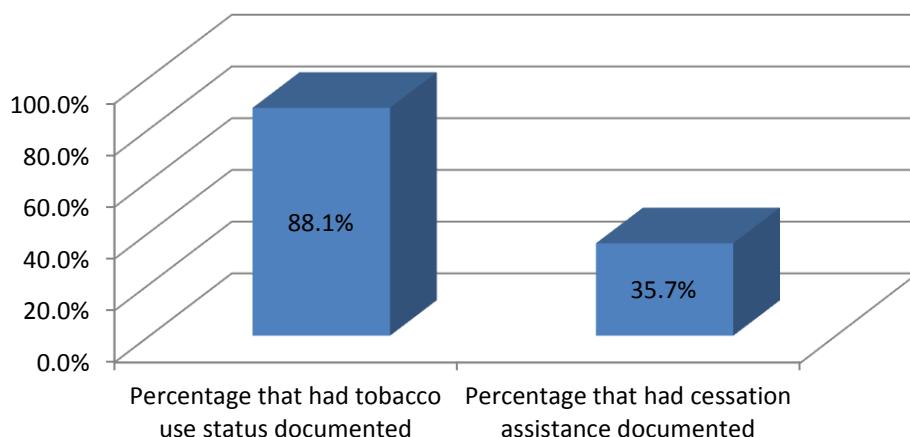
1. Was tobacco use status documented? (yes or no)
2. If patient is current tobacco user, was it documented that the practice offered some type of tobacco cessation assistance? (yes or no)

If the answer to question #1 was "no," they did not answer question #2.

Chart review data (self-reported) was entered online.

The pre-project chart review data revealed that 88.1 percent of charts had tobacco use status documented and 35.7 percent included documentation that the practice offered assistance to help the patient quit.

## Pre-Project Chart Review Results



Selected practices were asked to submit their implementation plans by the end of June. Office Champions were all offered opportunities to learn about potential system changes during the required teleconferences, online training program and in the practice manual. Practices were allowed to use the suggested strategies or they could create other specific ideas for their practices. For each change they planned to make, Office Champions were required to indicate the following:

1. Change to be made
2. How change will be made
3. Who (title) is responsible for change
4. Implementation date
5. How change will be monitored

*"This is a great program. We've been successful in helping several patients with their quit attempts."*

*-2012 Office Champion participant*

In addition, Office Champions were required to submit the date of their staff meeting and the number of people in attendance. On average, Office Champions submitted three to four system changes per practice.

Common themes of the implementation plans included the following:

### Patient Education and Follow-Up:

- Offer cessation counseling to patients and develop systems and processes for follow-up calls and emails with patients expressing a willingness to make a quit attempt.
- Display patient education materials, including posters, patient education brochures, quitline referral cards, Stop Smoking Guides; have practice staff wear lapel pins.
- Create a list of community resources for tobacco cessation for patients and families.
- Remove magazines that have tobacco ads from waiting areas and exam rooms.

### Staff Education:

- Educate staff on coding and billing for tobacco dependence and counseling, Meaningful Use, FDA-approved medications for tobacco cessation and Motivational Interviewing techniques.
- Create a tobacco-free environment and workplace.

### EHR changes:

- Use of tobacco cessation EHR template and creation of patient registries.
- Implement new patterns and EHR changes to help better document tobacco use information from patients.
- Create patient flowcharts and identify specific opportunities for intervention at each point.

Practices implemented their system changes between July 1 and November 30, 2012.



Pamela Rodriguez, CAE, exhibiting at the National Conference on Tobacco or Health

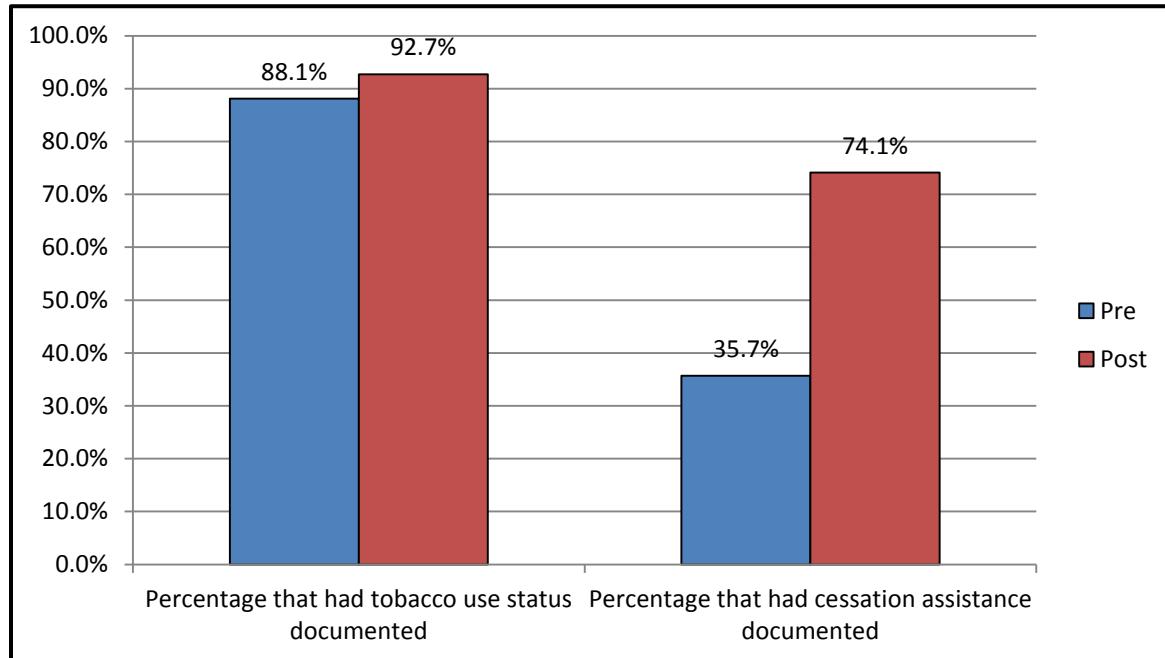
## Post-Project Chart Review and Program Evaluation

Forty-nine of fifty practices completed the project and received their administrative payments. Both qualitative and quantitative data were collected to evaluate the materials, the Office Champions model and the level of success of system change within the practices.

### Post-project chart review:

After implementation concluded at the end of November, practices were asked to again review data from 20 patient charts. The Office Champions were asked to follow the same process and answer the same questions as the pre-project chart review and enter their answers online.

### Chart review results



The post-project chart review revealed an improvement, specifically a 5.22% increase over baseline, in the percentage of patients that had tobacco use status documented. The post-project chart review revealed a significant improvement, specifically a 107.6% increase over baseline, in the percentage of patients for whom cessation assistance was documented.

### Online Evaluation Survey:

During the first week in December, Office Champions were asked to complete an online evaluation which included questions about the usefulness of the training items and project materials in helping identify and make system changes as well as other specific interventions of the project. Office Champions were able to rate the project materials on a Likert scale from extremely useful to not at all useful. At the end of the evaluation survey additional comments were solicited from Office Champions.

Practices responded that they found the project materials useful in helping them identify and make system changes in their practice.

The materials found to be the most useful were as follows:

- Stop Smoking Guides
- Patient education brochures
- Treating Tobacco Dependence Practice Manual
- AAFP quitline referral cards
- Guide to Integrating Tobacco Cessation into Electronic Health Records

Barriers practices encountered in implementing changes in practice included: competing demands, too busy, technology challenges and staff buy-in.

Constructive comments we received included:

- Conduct a chart review midway through the project to check progress and make adjustments accordingly
- To continually address smoking cessation there has to be an incentive or prompt in the EHR
- Additional assistance with billing for tobacco counseling

## Recognizing practices

Recognition items, as described in the application, were emailed to all participating practices. A full-page ad will appear in a 2013 issue of *American Family Physician*. A list of the selected practices was distributed at the 2012 AAFP Annual Scientific Assembly. The practice names are also available to view on the AAFP website.

## Summary and key findings

Forty-nine out of fifty practices completed the project. The post-project chart review revealed a 5.22% increase over baseline for the percentage of patients that had tobacco use status documented. With regard to the results of the post-project chart review relating to the percentage of patients that had cessation assistance documented, after implementation of the systems changes there was a dramatic increase in this percentage: 35.7% pre-implementation to 74.1% post-implementation; a 107.6% increase over baseline.

These increases of 5.22% and 107.6% over baseline show that the Office Champions model was instrumental in assisting the practices successfully make systems changes to integrate tobacco cessation activities into daily office routines. The results indicate that there was in fact a systems change as desired and that the systems change created a positive directionality in the percentage of patients that had tobacco use status documented and that some type of tobacco cessation assistance was offered.

*"This was a beneficial research project which allowed our office an opportunity to expand our knowledge and education materials regarding cessation of smoking. Now we have the most up-to-date information along with coding criteria. This project had minimal procedural changes but yet a huge impact on the information/education part. Thank you."*

*-2012 Office Champion*

*participant*

Additional successes, per the evaluation survey, of the project included:

- On average, Office Champions submitted three to four system changes per practice. Practices indicated that they successfully completed 95% of these system changes.
- 89% of the practices indicated all or most of the changes made were still in place at the conclusion of the project.
- 96% of the practices were confident they would be able to sustain their changes.
- 87% of practices found the chart reviews beneficial.

The Office Champion model was, once again, successful. Office Champions, working in various roles in the family medicine practices, provided leadership in implementing tobacco cessation systems change and activities in their offices. The model worked in practices of varying sizes in rural, urban and suburban settings, and Office Champions were confident their system changes would be sustainable.

## Next steps

The final project report and materials will be shared on the AAFP website for dissemination to family medicine practices nationwide. The AAFP has been awarded an independent medical education grant by Pfizer Inc, through the Smoking Cessation Leadership Center, to implement the Office Champions tobacco cessation model in 20 Federally Qualified Health Centers. The project will take place December 2012 through January 2014. The Office Champions model has proven successful in three public health areas: tobacco cessation, fitness, and immunizations. Future efforts will seek to operationalize the treatment of tobacco dependence in the Patient-Centered Medical Home (PCMH) as well as universal use in family medicine practices and residency programs.

*"We are currently working to obtain PCMH status as well as a Diabetes Recognition program. This project was a great incentive and reminder about the value of documenting tobacco status/counseling as it is a significant component for the PCMH journey."*

*-2012 Office Champion participant*

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