

Technical Assistance for Local Health Departments to Support, Leverage and Expand Use of CDC's Tips from Former Smokers™ Campaign



Introduction

In the United States, tobacco continues to kill more than 480,000 people each year.¹ Tobacco use causes damage to the body and can lead to long-term health problems for tobacco users and those close to them.² In an effort to address this issue, the Center for Disease Control and Prevention (CDC) developed the Tips from Former Smokers™ Campaign (Tips™), which encourages tobacco users to quit by sharing the real-life experiences of former smokers. The goals of the Tips™ campaign is to:

- Build public awareness of the immediate health damage caused by smoking and exposure to secondhand smoke;
- Encourage smokers to quit and make free help available; and
- Encourage smokers not to smoke around others and nonsmokers to protect themselves and their families from exposure to secondhand smoke.

Local health departments and their partners play a critical role in population-based tobacco prevention and cessation efforts. According to the 2016 National Profile of Local Health Departments (Profile Study), 74% of local health departments (LHDs) provide population-based primary prevention services for tobacco prevention and 38% of LHDs regulate, inspect, or license tobacco retailers in their communities.³ Recognizing that many local communities are already taking steps to address prevention and eliminate tobacco use, the National Association of County and City Health Officials, with funding from the CDC, Office on Smoking and Health, developed a technical assistance support to local health departments (LHDs) and their associated healthcare providers to assess if the placement of Tips™ materials in clinical settings would increase the number of tobacco cessation conversations between healthcare providers and patients.

This report highlights the three LHDs' efforts to increase cessation conversations during the project implementation period.

LHD Implementation of CDC's Tips for Former Smokers™ Campaign Project

Through a competitive application, NACCHO selected three LHDs to receive technical support and Tips for Former Smokers™ campaign materials to implement the project in their community. The selected communities were: City of Sioux Falls Health Department (SFHD), in Sioux Falls, SD; Utah County Health Department (UCHD), in American Fork, UT; and Public Health

Solutions (PHS), in Crete, NE. To accomplish this project NACCHO provided the LHDs with printed Tips™ materials and direct technical assistance. With these resources, LHD staff educated clinical staff on the campaign and worked with them to place materials throughout the designated health provider offices.

To measure the success of the project, during the first two weeks of April, clinical staff first tracked a baseline number of conversations prior to Tips™ materials being placed in their clinics. During the 8-week implementation, LHD staff placed Tips™ materials (video and/or print) into clinic waiting rooms and patient rooms, and educated clinic staff on evidence-based tobacco cessation intervention strategies (e.g. the 5As) and free tobacco cessation resources, such as state quitlines. Clinic staff then tracked the number of tobacco cessation conversations occurring between patients and clinic staff for eight weeks.

City of Sioux Falls Health Department



Community Overview

The City of Sioux Falls Health Department (SFHD) serves the largest city in South Dakota (pop. 853,175). The city is experiencing rapid population growth, adding 3,000-4,000 new residents each year. Live Well Sioux Falls is an SFHD-based initiative designed to improve the health and well-being of residents through regular community health assessments and collaborative solution building.

The 2016 SFHD Community Health Status Report identified tobacco prevention as a major priority. SFHD found that 16.5 percent of South Dakota high school students are smokers and 11.5 percent of youth use spit/chew tobacco. Live Well Sioux Falls supports tobacco prevention by promoting smoke-free housing and tobacco-free worksites and promoting the South Dakota Quitline. SFHD also houses Falls Community Health, a Federally Qualified Health Center (FQHC) that provides primary medical and dental care through its main clinic and through three school-based clinics. Falls Community Health serves more than 13,000 patients, including a significant number of patients diagnosed with hypertension.

Program Implementation

The SFHD Community Health Educators designed a simple training for clinic staff and providers on delivering the 5As (a CDC-

recommended tobacco cessation counseling protocol), using the Tips™ materials, and making referrals to free cessation services, such as the Quitline. SFHD Community Health Educators also identified placement strategies that would make the Tips™ materials easily accessible to patients as well as clinic staff and providers. For example, flyers in patient exam rooms served as a visual reminder for staff to speak to patients about tobacco cessation and palm-sized reference cards with Quitline information were an easy tool to use during the patients' appointments.

The SFHD integrated the Tips™ Campaign Materials into their "in-house" Federally Qualified Health Center (FQHC), the Falls Community Health Clinic. Designing an implementation strategy with the needs of clinic staff and providers in mind is essential for success. In addition to facilitating the integration of a new practice into clinic flow, the test period also revealed opportunities to tailor the approach to meet the unique needs of specific subpopulations. For example, the clinic provides care to the local Nepali community which has a high proportion of smokeless tobacco users. The clinic intends to continue implementing the Tips™ campaign. SFHD Community Health Educators plan to support integration through onsite tobacco cessation classes and provider and staff "refresher" trainings. Table 1 provides an overview of implementation data.

Table 1 | City of Sioux Falls Health Department Implementation Results

INDICATORS	BASELINE	IMPLEMENTATION
Average # of patients seen per week	149	269
Average # of patients seen who are smokers	61	122.5
Average # of cessation conversations per week	22	56.5
Percent of smokers having a cessation conversation	36%	46%

Program Outcomes

During the 8-week implementation period, the percent of smokers having a cessation conversation with their provider at the Sioux Falls Community Health Clinic increased from 36% to 46%. This is a 29% increase in cessation conversations compared to the baseline (Figure 1).

Figure 1 | Baseline and Implementation Tobacco Conversations at Sioux Falls Health Department sites.



Falls Community Health Clinic staff also reported that almost all of the conversations about tobacco use during patient visits were initiated by providers, indicating that providers integrated the Tips™ campaign into their routine practice. In addition to providing materials, some staff even called the Quitline with the patient from the exam room. A number of factors might have facilitated the adoption of the Tips™ campaign across the clinic. First, clinic staff believed Tips™ would be an effective intervention because it shared stories from real people. Second, the campaign's emphasis on visual elements helped bridge language barriers.

Utah County Health Department



Community Overview

The Utah County Health Department (UCHD) serves the second largest county in Utah (pop. 600,000) and is committed to promoting the health of the community by preventing avoidable disease and injury, by monitoring the health of their community, responding to public health emergencies, and assuring conditions in which people can be healthy. While Utah County's adult smoking rate is 4.5%, UCHD strives to reduce that rate to zero using the CDC's Best Practices for Comprehensive Tobacco Control Programs and endgame strategies for tobacco prevention and cessation. UCHD's Tobacco Prevention and Control Program (TPCP) focuses on preventing tobacco use among youth, lowering the tobacco use rates, and reducing secondhand smoke (SHS) exposure. Beyond implementing Tips™ in UCHD's own clinic they partnered with two local clinics serving low-income residents and college students. UCHD has a long-term relationship with the Molina Healthcare Clinic, which serves an area that has higher tobacco use rates. The Molina Healthcare Clinic specializes in treating Spanish-speaking, uninsured, and low-income populations. UCHD also shared Tips™ materials in the Utah Valley University Wellness Center that provides health services to 34,000 students.

Program Implementation

UCHD and Molina implemented the Tips™ Campaign. UCHD provided training to clinic staff on the Tips™ campaign and evidence-based cessation intervention strategies. Specifically, medical assistants learned how to initiate tobacco cessation conversations with patients, provide Tips™ campaign Spanish-language materials, and make referrals to a variety of free, accessible services.

Tips™ materials and training empowered clinic staff to hold cessation conversations by increasing their basic knowledge of tobacco use and providing accessible resources for hard-to-reach patients. One medical assistant noticed that some patients who did not appear ready to talk about quitting tobacco still picked up print materials at the clinic. This indication of interest motivated her to follow up in later visits and provide resources. Gaining buy-in from all medical assistants was important to the success of this intervention.

To support the integration of the Tips™ campaign, Spanish and English language materials were placed in the waiting room, at the front desk, and in the patient rooms. Then, UCHD provided training to clinic staff and providers on the Tips™ campaign and evidence-

based cessation intervention strategies. Specifically, medical assistants learned how to initiate tobacco cessation conversations with patients, provide *Tips*[™] campaign Spanish-language materials, make referrals to a variety of free, accessible services (e.g., Utah Tobacco Quitline, Spanish language podcasts and videos on the *Tips*[™] website), and ask follow-up questions at every visit. The provider would then follow up with the patient during the patient appointment to reinforce the messaging. Table 2 provides an overview of implementation data.

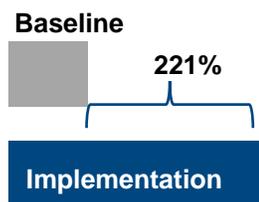
Table 2 | Utah County Health Department Implementation Results

INDICATORS	BASELINE	IMPLEMENTATION
Average # of patients seen per week	210	153.6
Average # of patients seen who are smokers	27	19.4
Average # of cessation conversations per week	3.5	8.1
Percent of smokers having a cessation conversation	13%	42%

Program Outcomes

During the 8-week implementation period, at the three clinic sites, there was a 221% increase in cessation conversations with smokers. Prior to the implementation of the *Tips*[™] campaign strategy, Molina Healthcare Clinic staff rarely asked about patients' tobacco use. Following the intervention, the staff reported putting forth more effort to provide tobacco cessation resources to patients and to connect with them on a personal level regarding their tobacco use.

Figure 2 | Baseline and Implementation Tobacco Conversations at Utah County Health Department sites.



A key factor might have facilitated the adoption of the *Tips*[™] campaign across the clinic. The clinic staff reported a strong commitment to helping their Spanish-speaking, low-income patients quit using tobacco and believed the *Tips*[™] campaign would be an effective strategy.

One longtime smoker said she had tried to quit “so many times” but was unsuccessful in her attempts. The medical assistant used the support skills gained through the *Tips*[™] campaign training to initiate a conversation about the patient’s tobacco use and the long-and short-term health effects, demonstrated the commitment of the clinic to supporting the patient, and provided several

resources, including the quitline number, Spanish language *Tips*[™] campaign materials, and a free ‘Quit Kit’. The medical assistant was empowered to help the patient, and the patient reported a renewed desire to quit smoking and direction for starting.

Public Health Solutions District Health Department



Community Overview

Public Health Solutions (PHS) is a district public health department serving roughly 52,000 people across Fillmore, Gage, Jefferson, Saline, and Thayer counties in rural Nebraska. The region faces a number of challenges when compared to the rest of the state, including population shrinkage, job loss, aging population, higher levels of poverty, poor health status, and lower levels of educational attainment. The mission of PHS is to prevent disease and injury, promote health and well-being, and protect the personal, community, and environmental health of all people. During the most recent five-county community health assessment, PHS found that 63% of respondents who use tobacco were interested in quitting the use of tobacco products. In response, PHS integrated a range of tobacco cessation strategies into its case-navigation services, home-visitation programs, and healthy lifestyle and cancer prevention program.

Program Implementation

PHS serves five counties in rural Nebraska. The region faces a number of challenges when compared to the rest of the state, including population shrinkage, job loss, aging population, higher levels of poverty, poor health status, and lower levels of educational attainment. PHS is unique among local health departments in that it has an on-site dental clinic. Routine dental exams include an oral cancer screening, and tobacco cessation is encouraged to maintain a healthy mouth and body. PHS implemented the *Tips*[™] Campaign in their on-site dental clinic. Providers commented that having the *Tips*[™] campaign materials in every patient room created an environment where providers could more readily discuss smoking cessation options with the patient. PHS found the *Tips*[™] campaign materials resonated with patients and providers more than previously used materials. They do intend to continue this initiative and feel it is important for the public to know that there is a local resource where they can receive the help they need to quit and improve their health.

To support the integration of the *Tips*[™] campaign materials at the dental clinic, the PHS Dental Program Coordinator developed, supported, and lead the program and served as a liaison between the dental clinic and the local health department. At the PHS, she posted print *Tips*[™] campaign materials in the waiting room, on the front door, and in the public bathroom. PHS also played video and audio messaging in the waiting room. At the dental clinic, print media was placed the lab-draw room, the waiting room, patient bathrooms, all provider-patient rooms, and the procedure room.

Staff and healthcare providers at the dental clinic were trained on initiating cessation conversations with patients and on the availability of free cessation resources, including the state quitline. A medical assistant screened for tobacco use during patient intake. The provider then analyzed the amount and frequency of tobacco

use, assessed the patient's readiness to quit, and identified barriers to quitting (e.g., money, time, and whether there were fellow smokers at home or in the patient's close circle of friends). Depending on the patient's readiness to quit and barriers to quitting, the provider shared *Tips*™ materials.

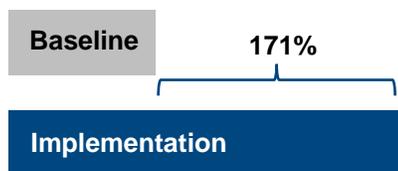
Table 3 | Public Health Solutions Implementation Results

INDICATORS	BASELINE	IMPLEMENTATION
Average # of patients seen per week	76	158.5
Average # of patients seen who are smokers	25	16.5
Average # of cessation conversations per week	6	11.25
Percent of smokers having a cessation conversation	24%	65%

Program Outcomes

During the 8-week implementation period, PHS had a 171% increase in the percent of smokers having a cessation conversation compared to baseline. Several key factors might have facilitated the adoption of the *Tips*™ campaign across the dental clinic. Providers commented that having the *Tips*™ campaign materials in every room created an environment where providers could more readily discuss smoking cessation options with the patient. PHS observed that clients did not want to openly ask about cessation or discuss their smoking habits, so it was useful to have the cessation conversations prompted by the LHD staff or the provider.

Figure 3 | Baseline and Implementation Tobacco Conversations at Public Health Solution site.



Conclusion

All participating LHDs had an increase in cessation conversations during the implementation of the Technical Assistance for Local Health Departments to Support, Leverage and Extend CDC's *Tips* from Former Smokers™ Campaign in Partnership with Healthcare Providers project. This project can be replicated by LHDs and community clinics because materials are free and accessible online and resonate with providers and patients. The data from each LHD demonstrates how the placement of *Tips*™ materials in clinical settings is an easy, low-cost approach to increase tobacco cessation.

Acknowledgments

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CDC's Tips From Former Smokers™ Campaign

August 2017

Public Health Solutions: Increasing Tobacco Cessation by Integrating CDC's Tips™ Campaign into a Dental Clinic

Background

The Centers for Disease Control and Prevention's (CDC's) *Tips from Former Smokers™* (*Tips™*) campaign encourages tobacco users to quit by sharing the real-life experiences of smokers. In 2017, the National Association of County and City Health Officials partnered with the CDC to provide technical assistance to three local health departments (LHDs) and their associated healthcare providers to examine whether the placement of *Tips™* materials in clinical settings would increase the number of tobacco cessation conversations between healthcare providers and patients.

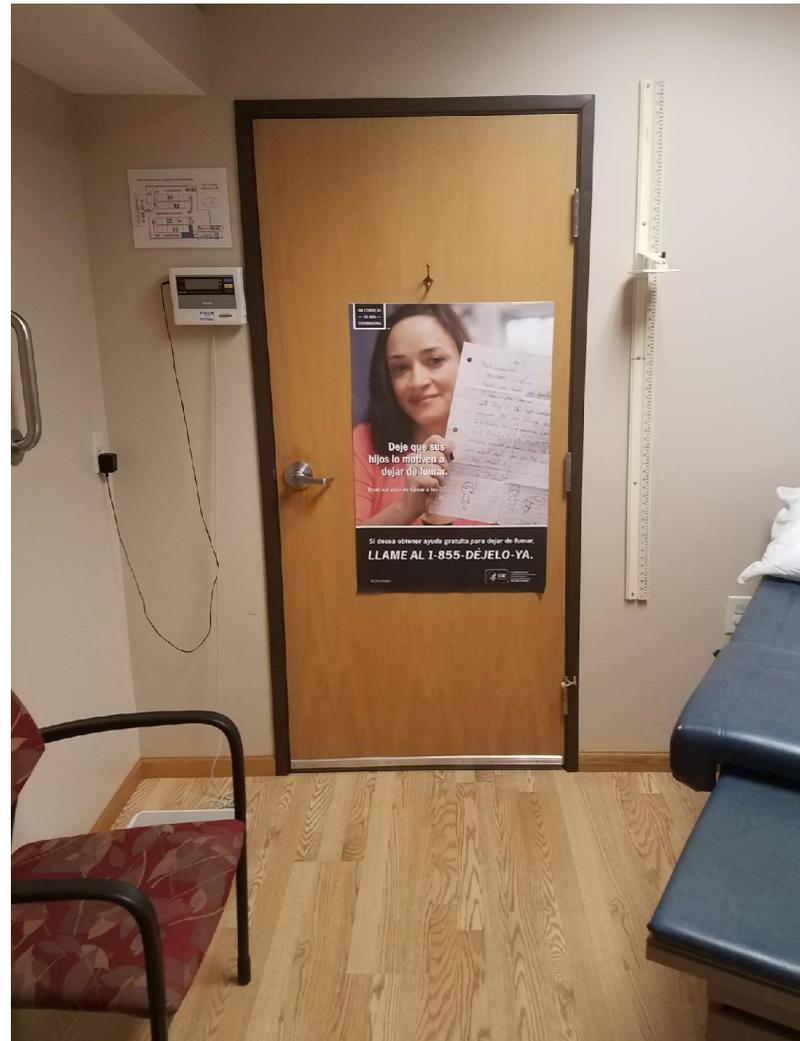
To accomplish this project, LHD staff worked with clinical staff to track the baseline number of healthcare provider-patient cessation conversations happening before *Tips™* materials were placed into the clinics. Then, LHD staff placed *Tips™* video and print materials (which are always free-of-charge from the CDC) into clinic waiting rooms and patient rooms and educated clinic staff about evidence-based tobacco cessation intervention strategies (e.g., the 5As) and free tobacco cessation resources, such as state QuitLines. For the next eight weeks, clinic staff tracked the number of tobacco cessation conversations occurring between patients and clinic staff. The data from each LHD demonstrates how the placement of *Tips™* materials in clinical settings is an easy, low-cost approach to increasing tobacco cessation.

Public Health Solutions

Public Health Solutions (PHS) is a district public health department serving roughly 52,000 people across Fillmore, Gage, Jefferson, Saline, and Thayer counties in rural Nebraska. The region faces a number of challenges when compared to the rest of the state, including population shrinkage, job loss, aging population, higher levels of poverty, poor health status, and lower levels of educational attainment. The mission of PHS is to prevent disease and injury, promote health and well-being, and protect the personal, community, and environmental health of all people. During the most recent five-county community health assessment, PHS found that 63% of respondents who used tobacco were interested in quitting the use of tobacco products. In response, PHS integrated a range of tobacco cessation

strategies into its case-navigation services, home-visitation programs, and healthy lifestyle and cancer prevention program.

PHS is unique among LHDs in that it has an onsite dental clinic. The dental clinic conducts routine dental exams that include an oral cancer screening and encourages tobacco cessation. PHS also has a "Life of Smiles" program that educates parents and children about healthy oral care habits, what causes cavities, and how diet and tobacco can affect mouth health.



Integration of *Tips™* Campaign Materials into a Dental Clinic

The PHS Dental Program Coordinator developed, supported, and led the program to integrate the *Tips™* campaign materials into the dental clinic and served as a liaison between the clinic and PHS. At the health department, she posted print *Tips™* campaign materials in the waiting room, on the front door, and in the public bathroom. PHS also played video and audio messaging in the waiting room. At the dental clinic, she placed print media in the lab-draw room, the waiting room, patient bathrooms, all provider patient rooms, and the procedure room.

PHS trained staff and healthcare providers at the dental clinic on initiating cessation conversations with patients and on the availability of free cessation resources, including the state QuitLine. A medical assistant screened for tobacco use during patient intake. The provider then analyzed the amount and frequency of tobacco use, assessed the patient's readiness to quit, and identified barriers to quitting (e.g., money, time, whether there were fellow smokers at home or in the patient's close circle of friends). Depending on the patient's readiness to quit and barriers to quitting, the provider shared *Tips™* materials.

Results

During the 10-week implementation period, PHS found a 200% increase in cessation conversations. Data was consistent throughout the entire project and remained steady. Several key factors might have facilitated the adoption of the *Tips™* campaign across the dental clinic. Providers commented that having the *Tips™* campaign materials in every room created an

During the 10-week implementation period, PHS found a 200% increase in cessation conversations.

environment where providers could more readily discuss smoking cessation options with the patient. PHS observed that clients did not want to openly ask about cessation or discuss their smoking habits, so it was useful to have the cessation conversations prompted by the LHD staff or the provider.

Insights

PHS found the *Tips™* campaign materials resonated with patients and providers more than previously used materials and intends to continue this initiative to make the public aware that they can receive the help they need to quit and improve their health.

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CDC's Tips From Former Smokers™ Campaign

August 2017

City of Sioux Falls Health Department: Increasing Tobacco Cessation by Integrating CDC's *Tips*™ Campaign into an In-House Federally Qualified Health Center

Background

The Centers for Disease Control and Prevention's (CDC's) *Tips from Former Smokers*™ (*Tips*™) campaign encourages tobacco users to quit by sharing the real-life experiences of smokers. In 2017, the National Association of County and City Health Officials partnered with the CDC to provide technical assistance to three local health departments (LHDs) and their associated healthcare providers to examine whether the placement of *Tips*™ materials in clinical settings would increase the number of tobacco cessation conversations between healthcare providers and patients.

To accomplish this project, LHD staff worked with clinical staff to track the baseline number of healthcare provider – patient cessation conversations happening before *Tips*™ materials were placed into the clinics. Then, LHD staff placed *Tips*™ video and print materials (which are always free-of-charge from the CDC) into clinic waiting rooms and patient rooms and educated clinic staff about evidence-based tobacco cessation intervention strategies (e.g., the 5As) and free tobacco cessation resources, such as state QuitLines. For the next eight weeks, clinic staff tracked the number of tobacco cessation conversations occurring between patients and clinic staff. The data from each LHD demonstrates how the placement of *Tips*™ materials in clinical settings is an easy, low-cost approach to increasing tobacco cessation.

City of Sioux Falls Health Department



The City of Sioux Falls Health Department (SFHD) serves the largest city in South Dakota (population 853,175). The city is experiencing rapid population growth, adding 3,000–4,000 new residents each year. Live Well Sioux

Falls is a SFHD-based initiative designed to improve the health and well-being of residents through regular community health assessments and collaborative solution-building.

SFHD's 2016 community health status report identified tobacco prevention as a major priority. SFHD found that 16.5% of South Dakota high school students are smokers and 11.5% of youth use spit/chew tobacco. Live Well Sioux Falls supports tobacco prevention by promoting smoke-free housing and tobacco-free worksites and promoting the South Dakota Quitline. SFHD also houses Falls Community Health, a Federally Qualified Health Center (FQHC) that provides primary medical and dental care through its main clinic and through three school-based clinics. Falls Community Health serves more than 13,000 patients, including a significant number of patients diagnosed with hypertension.

Integration of *Tips*™ Campaign Materials into an "In-House" FQHC

The successful integration of *Tips*™ materials into clinics requires healthcare providers to be trained on a protocol for tobacco intervention and cessation referrals. In many FQHCs, including SFHD's Falls Community Health, staff work hard to balance the provision of high-quality medical care with the operational and administrative demands of running a clinic. SFHD's Live Well Sioux Falls Community Health Educators anticipated concern from clinic staff, who might perceive the *Tips*™ intervention as additional work.

To address these implementation challenges, the Community Health Educators consulted with the Falls Community Health



Tips™ materials in an exam room at Falls Community Health

Clinic's leadership team to determine the best way to introduce the new strategy. Based on their feedback, the Community Health Educators developed a strategy to integrate *Tips™* into the clinic setting and routine patient visits. The SFHD Community Health Educators designed a simple training for clinic staff and providers on delivering the 5As (a CDC-recommended tobacco cessation counseling protocol), using the *Tips™* materials, and making referrals to free cessation services, such as the Quitline. SFHD Community Health Educators also identified placement strategies that would make the *Tips™* materials easily accessible to patients as well as clinic staff and providers. For example, flyers in patient exam rooms served as a visual reminder for staff to speak to patients about tobacco cessation and palm-sized reference cards with Quitline information were an easy tool to use during patient' appointments.

Results

During the 10-week implementation period, the Falls Community Health Clinic saw a 163% increase in cessation conversations compared to the baseline data. Its in-house FQHC healthcare provider also had a 154% increase in cessation conversations compared to baseline data.

Falls Community Health Clinic staff also reported that almost all of the conversations about tobacco use during patient visits were initiated by providers, indicating that providers integrated the *Tips™* campaign into their routine practice. In addition to providing materials, some staff even called the Quitline with the patient from the exam room. A number of factors facilitated the adoption of the *Tips™* campaign across the clinic. First, clinic staff believed *Tips™* would be an effective intervention because it shared stories from real people. Second, the campaign's emphasis on visual elements helped bridge language barriers with as patients from the city's Nepali community, which has a high proportion of chew tobacco users.

Insights

Designing an implementation strategy with the needs of clinic staff and providers in mind is essential for success. In addition to facilitating the integration of a new practice into clinic flow, the test period also revealed opportunities to tailor the approach to meet the unique needs of specific sub-populations, including the Nepalese.

Falls Community Health Clinic intends to continue implementing the *Tips™* campaign. SFHD Community Health Educators plan to support ongoing integration of the campaign through onsite tobacco cessation classes and provider and staff "refresher" trainings.

To view the Sioux Falls Community Health Status Report, visit http://livewellsiouxfalls.org/images/uploads/main/2016_CHNA_Report_Final.pdf.

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CDC's Tips From Former Smokers™ Campaign

August 2017

Utah County Health Department: Increasing Tobacco Cessation by Integrating CDC's *Tips*™ Campaign into an External Health Center

Background

The Centers for Disease Control and Prevention's (CDC's) *Tips from Former Smokers*™ (*Tips*™) campaign encourages tobacco users to quit by sharing the real-life experiences of smokers. In 2017, the National Association of County and City Health Officials partnered with the CDC to provide technical assistance to three local health departments (LHDs) and their associated healthcare providers to examine whether the placement of *Tips*™ materials in clinical settings would increase the number of tobacco cessation conversations between healthcare providers and patients.

To accomplish this project, LHD staff worked with clinical staff to track the baseline number of healthcare provider – patient cessation conversations happening before *Tips*™ materials were placed into the clinics. Then, LHD staff placed *Tips*™ video and print materials (which are always free-of-charge from the CDC) into clinic waiting rooms and patient rooms and educated clinic staff about evidence-based tobacco cessation intervention strategies (e.g., the 5As) and free tobacco cessation resources, such as state QuitLines. For the next eight weeks, clinic staff tracked the number of tobacco cessation conversations occurring between patients and clinic staff. The data from each LHD demonstrates how the placement of *Tips*™ materials in clinical settings is an easy, low-cost approach to increasing tobacco cessation.

Utah County Health Department



The Utah County Health Department (UCHD) serves the second largest county in Utah (population 600,000) and is committed to promoting the health of the community by preventing avoidable disease and injury, monitoring the health of their community, responding to public health emergencies, and assuring

conditions in which people can be healthy. While Utah County's adult smoking rate is 4.5%, UCHD strives to reduce that rate to zero using the CDC's Best Practices for Comprehensive Tobacco Control Programs and endgame strategies for tobacco prevention and cessation. UCHD's Tobacco Prevention and Control Program focuses on preventing tobacco use among youth, lowering the tobacco use rates, and reducing secondhand smoke exposure. UCHD also has a long-term relationship with the Molina Healthcare Clinic, which serves an area that has higher tobacco use rates and specializes in treating Spanish-speaking, uninsured, and low-income populations.

Integration of *Tips*™ Campaign Materials into Molina Healthcare Clinic

To support the integration of the *Tips*™ campaign, Spanish and English language materials were placed in the waiting room, at the front desk, and in the patient rooms. UCHD provided training to clinic staff and providers on the *Tips*™ campaign and evidence-based cessation intervention strategies. Specifically, medical assistants learned how to initiate tobacco cessation conversations with patients, provide *Tips*™ campaign Spanish-language materials, make referrals to a variety of free, accessible services (e.g., Utah Tobacco Quitline, Spanish-language podcasts and videos on the *Tips*™ website), and ask follow-up questions at every visit. The provider would then follow up with the patient during the patient appointment to reinforce the messaging.



Results

During the 10-week implementation period, which occurred from April to June 2017, Molina Healthcare Clinic staff reported a remarkable 500% increase in cessation conversations in April compared to the baseline data rates. A 420% increase in cessation conversations occurred in the entire month of May compared to the baseline data. Finally, a 460% increase in cessation conversations occurred in June compared to the baseline data. Prior to the implementation of the *Tips™* campaign strategy, Molina Healthcare Clinic staff rarely asked about patients' tobacco use. Following the intervention, the staff reported putting forth more effort to provide tobacco cessation resources to patients and connect with them personally regarding their tobacco use.

The clinic staff reported a strong commitment to helping their Spanish-speaking, low-income patients quit using tobacco and believed the *Tips™* campaign would be an effective strategy, which was essential to the success of the campaign. One longtime smoker said she had tried to quit "so many times" but was unsuccessful in her attempts. The medical assistant used the support skills gained through the *Tips™* campaign training to initiate a conversation about the patient's tobacco use and the long- and short-term health effects, demonstrated the commitment of the clinic to supporting the patient, and provided several resources, including the QuitLine number, Spanish language *Tips™* campaign materials, and a free "quit kit." The medical assistant was empowered to help the patient, and the patient reported a renewed desire to quit smoking and direction for starting.

Insights

The *Tips™* campaign and training empowered clinic staff to hold cessation conversations by increasing their basic knowledge of tobacco use and providing accessible resources for hard-to-reach populations. One medical assistant noticed that some patients who were not ready to talk about quitting tobacco would pick up printed materials at the clinic. This indication of interest motivated her to follow up in later visits and provide resources. Gaining buy-in from all medical assistants was important to the success of this intervention. Molina Healthcare Clinic intends to continue implementing the *Tips™* campaign.

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