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Background

Inpatient to Outpatient Program (I2O)

- ❖ Hospitalization provides unique opportunity to offer patients who smoke or use other tobacco help in becoming tobacco free
- ❖ Importance of hospital-based tobacco use treatment increasingly recognized (e.g., 2012 Joint Commission Tobacco measure set)
- ❖ 1 FTE Tobacco Treatment Specialist, and one Social Work Masters student intern (16 hrs/week) provide:
 - Bedside tobacco treatment consults to hospitalized patients who use tobacco and cessation medication recommendations to inpatient medical team; and
 - Education to providers about resources and counseling strategies for addressing tobacco use with patients
- ❖ Provider satisfaction and feedback critical for program sustainability
- ❖ >2,500 consults from >550 providers ordered in first 2 ½ fiscal years
- ❖ Average number of consults over six month period increased 340% from Jul-Dec 2011 to July-Dec 2013

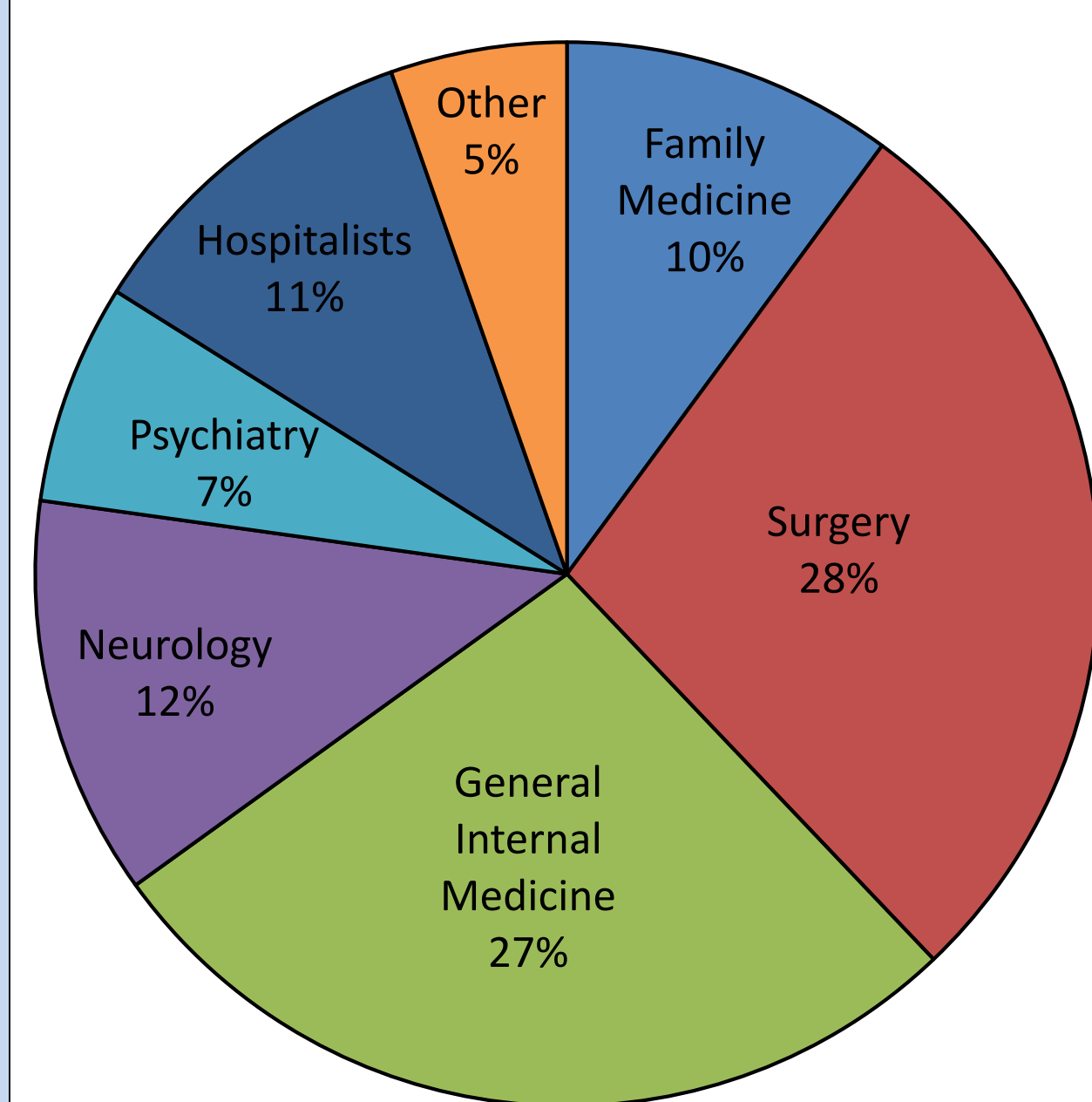
UNC Health Care:

- ❖ Instituted tobacco-free campus policy in 2007
- ❖ 803 bed teaching hospital
- ❖ Average daily admissions = 100; 20% with current tobacco use

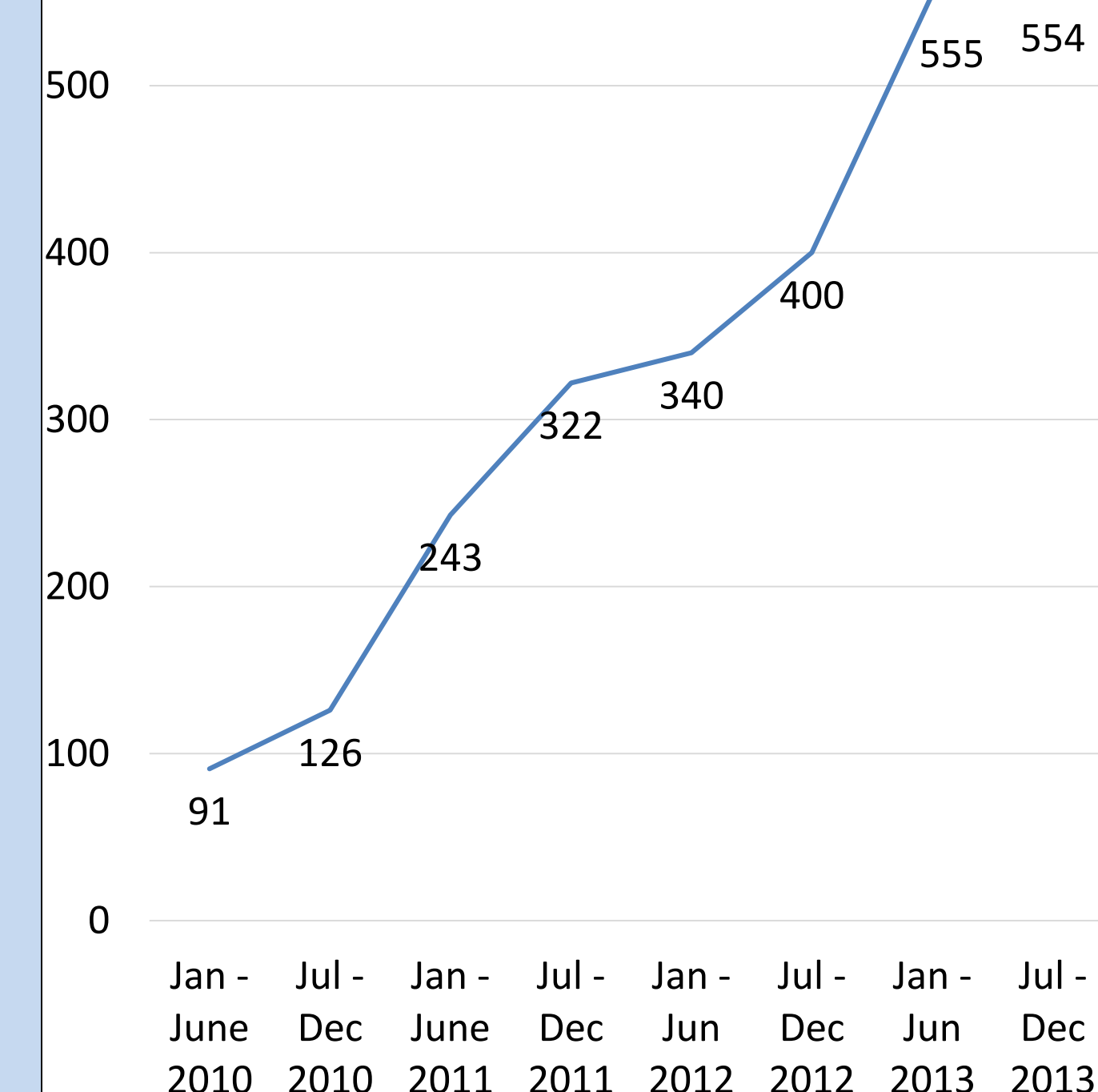
Method

- ❖ Surveyed providers who ordered consults July 2012- June 2013 to assess:
 - Satisfaction with tobacco cessation consult service
 - Factors prompting consult orders
 - Impact of service on provider behavior
 - Feedback for program improvement
- ❖ Online survey emailed to 265 providers
 - Attending physicians, residents, hospitalists, NP/PAs
 - Three reminder notices
 - N=118 (44.5% response rate)
- ❖ Incentive: chance to win one of three \$50 gift cards
- ❖ Exempted by UNC Institutional Review Board

Consults ordered by Services for FY13 (n = 955)



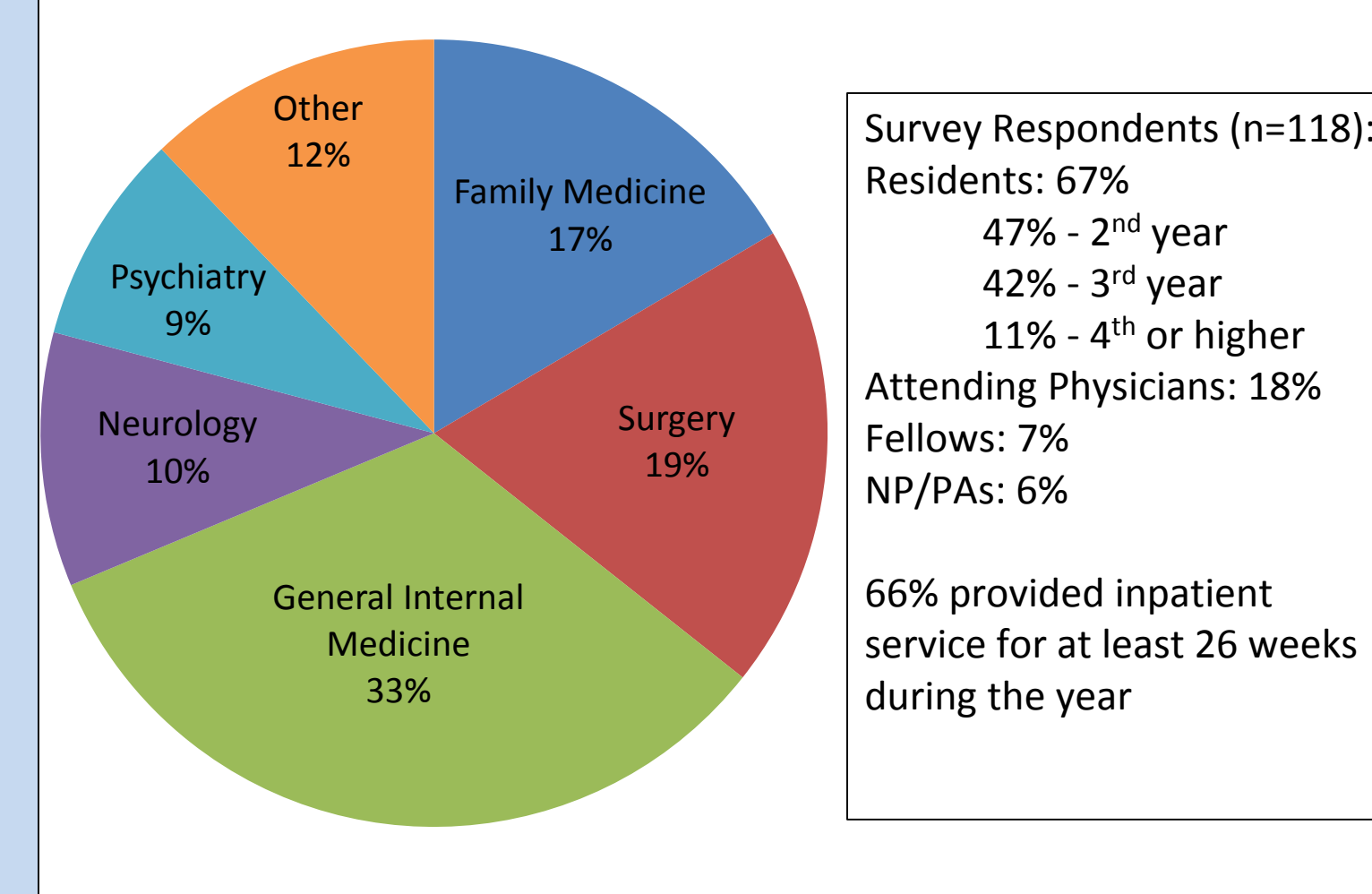
Total Tobacco Cessation Consults Ordered



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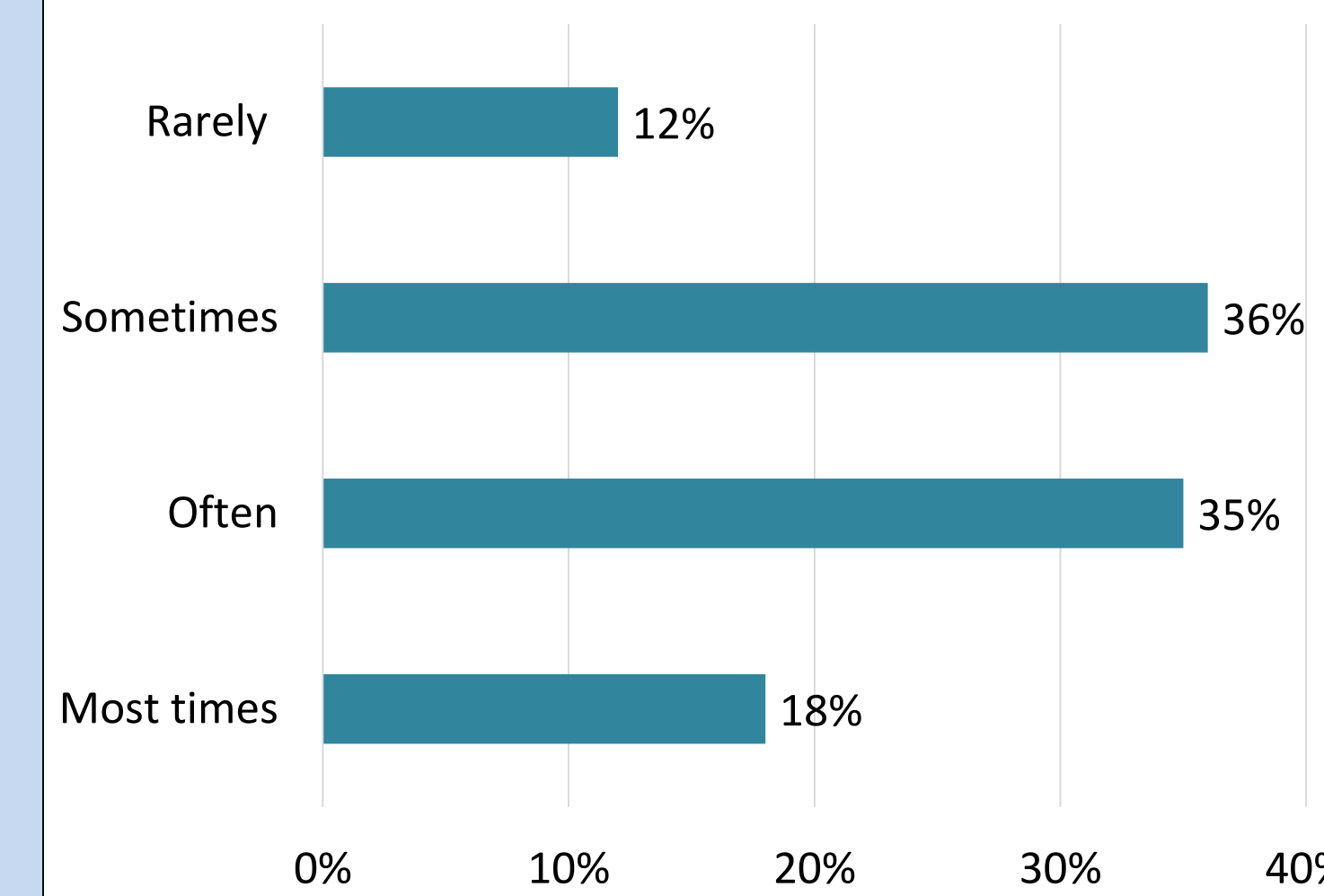
Results

Respondent Demographics (n=118)

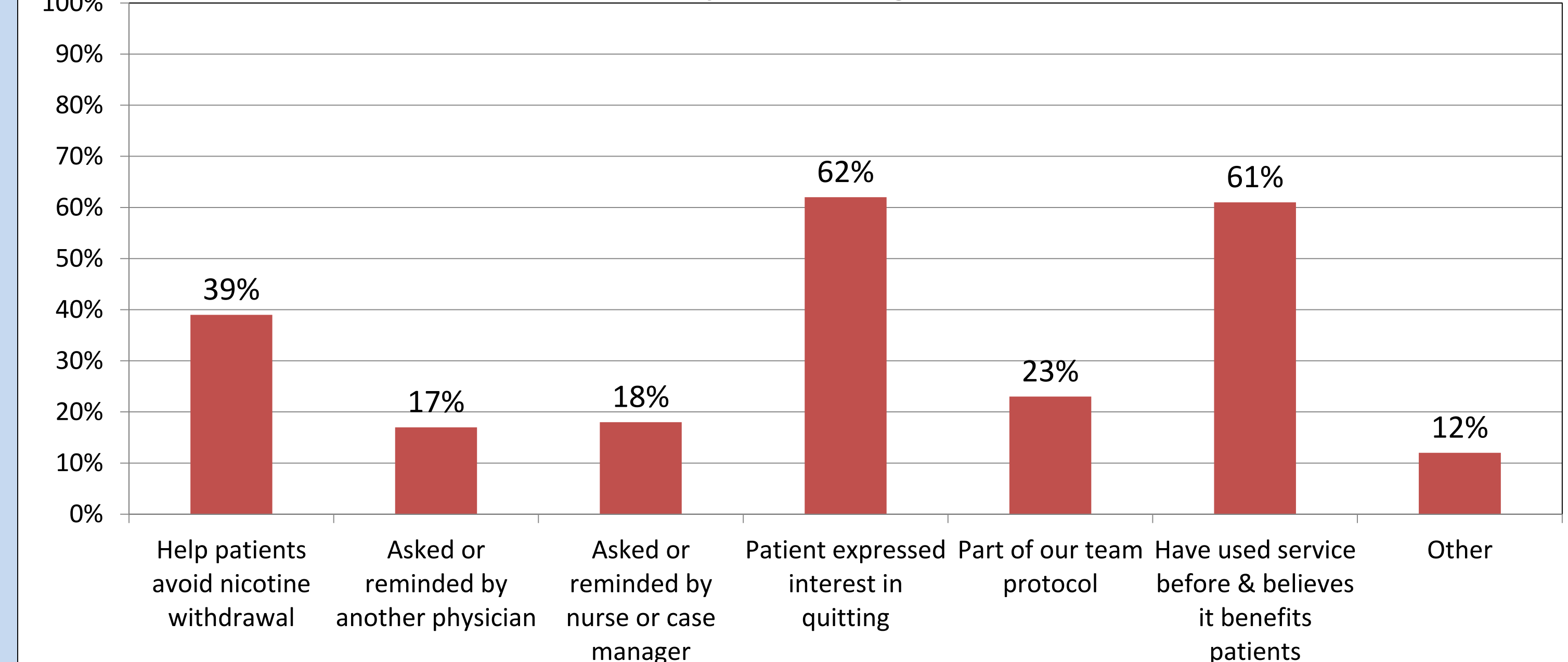


Survey Respondents (n=118):
 Residents: 67%
 47% - 2nd year
 42% - 3rd year
 11% - 4th or higher
 Attending Physicians: 18%
 Fellows: 7%
 NP/PAs: 6%
 66% provided inpatient service for at least 26 weeks during the year

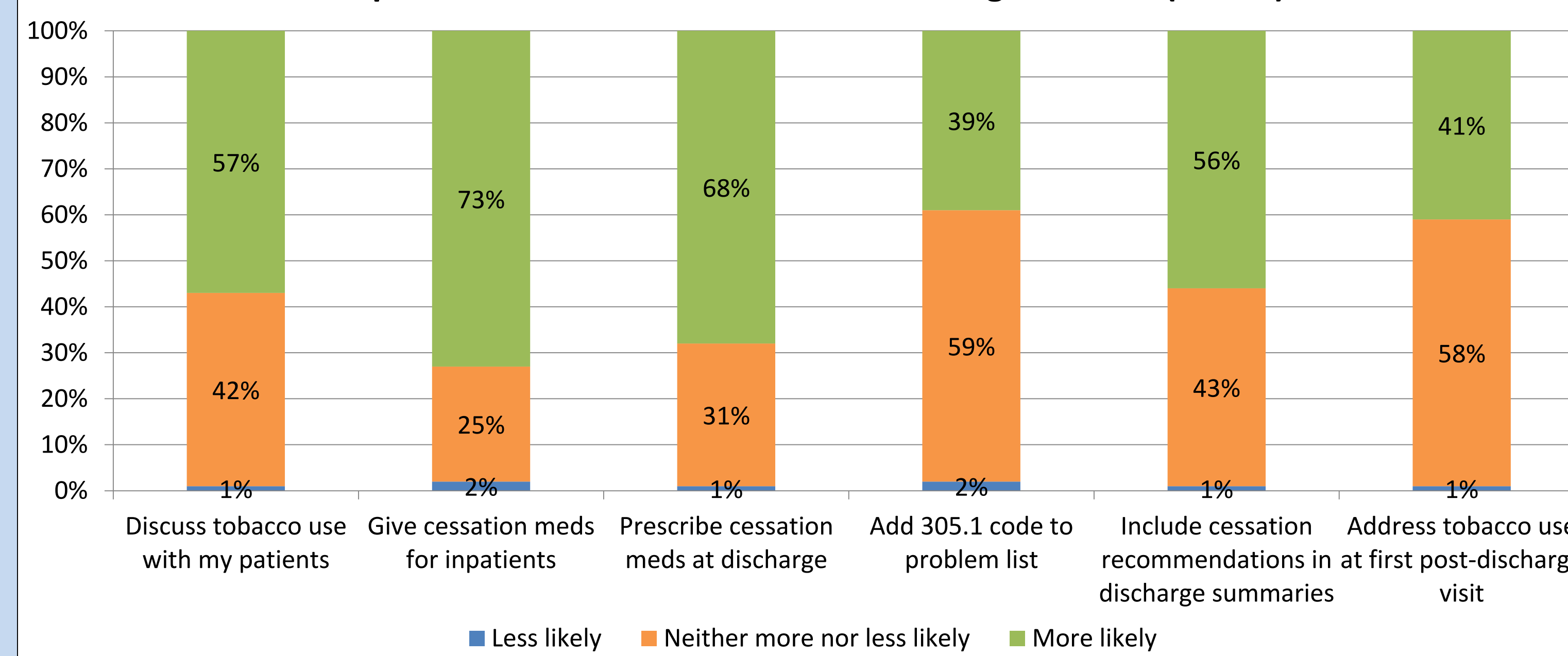
Frequency of ordering consult (n=118)



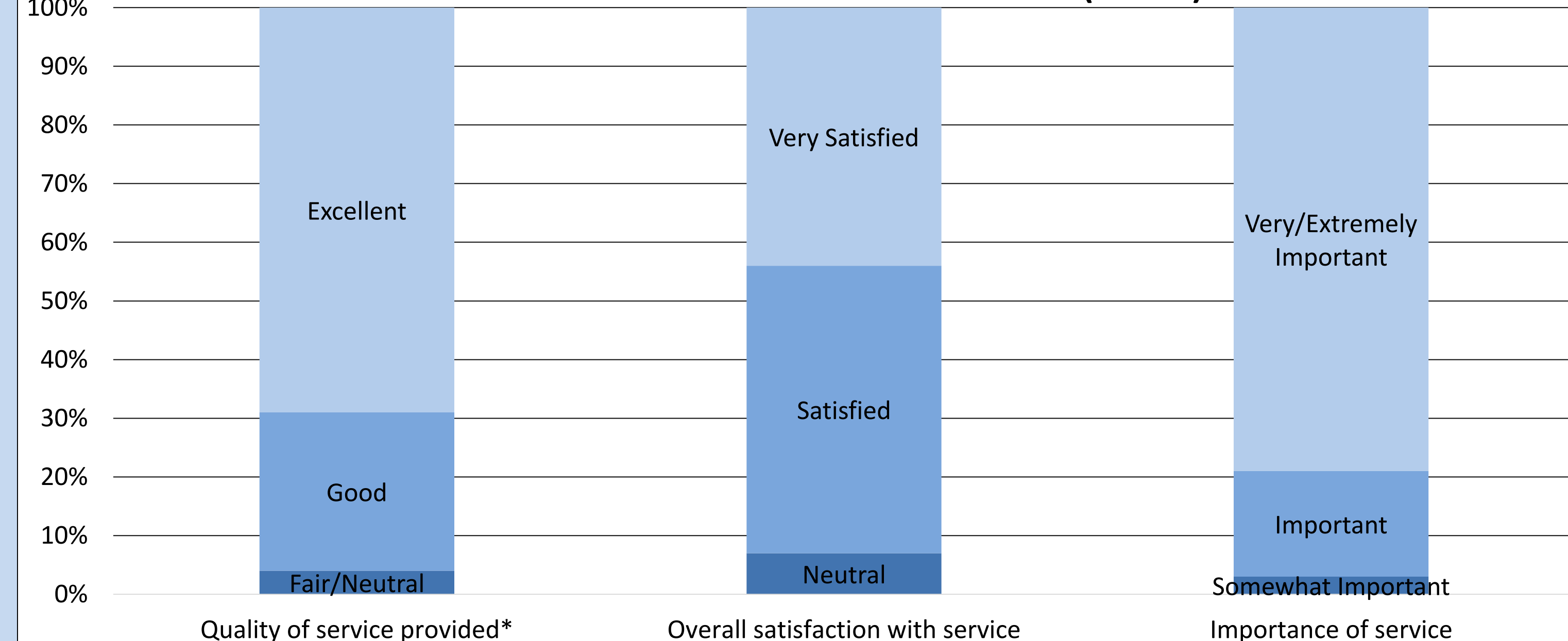
Factors Positively Influencing Consults (n=118)



Impact of Consults on Provider Counseling Behavior (n=118)



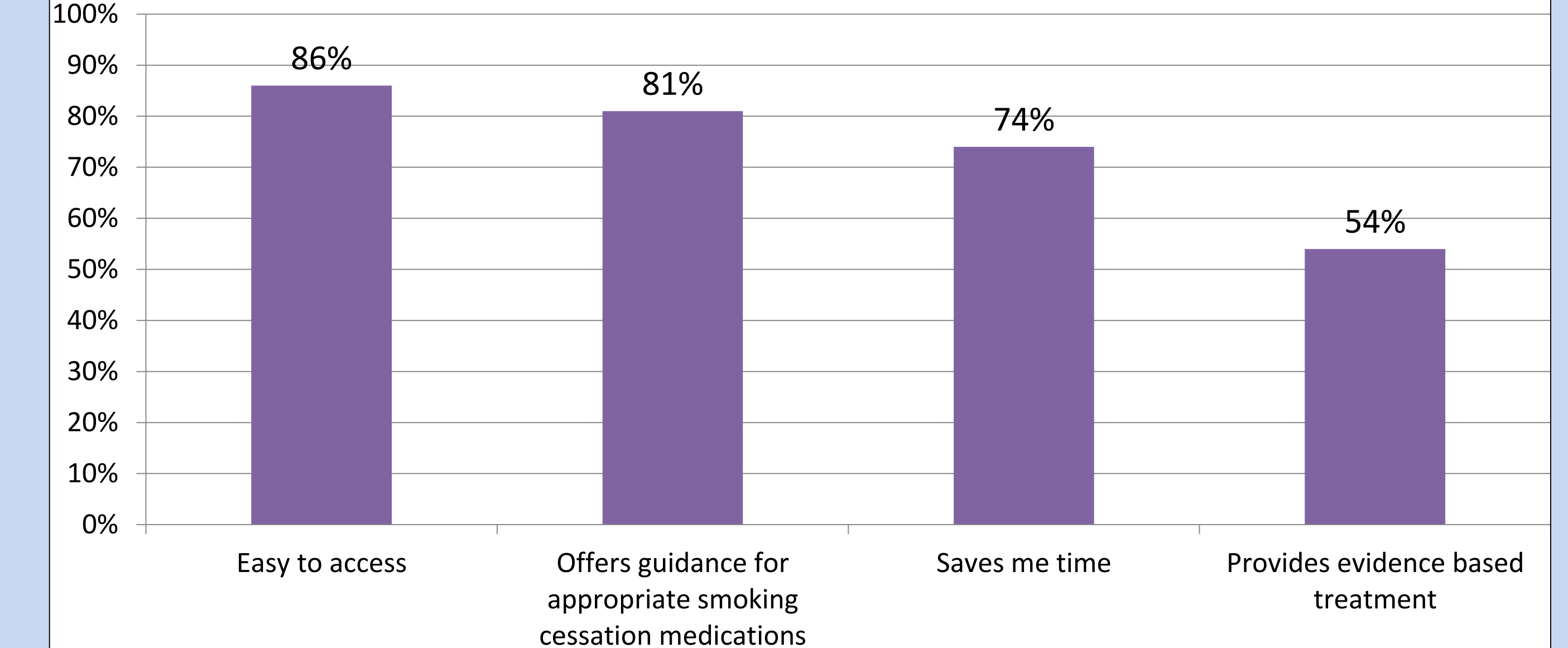
Provider Satisfaction with Consult Service (n=118)



*n=105; 13 respondents indicated they could not rate quality

Results

Most Valuable Characteristics of Consult Service (n=118)



- ❖ Provider behavior related to using consult service:
 - 86% have recommended or talked about the service with another provider
 - 68% more likely to prescribe tobacco cessation medications for patients during stay and at discharge
 - 57% more likely to talk with patients about tobacco cessation
- ❖ Elements contributing to high provider satisfaction and quality ratings:
 - Dedicated time and expertise of tobacco treatment specialist
 - Communication/treatment recommendations to medical team
 - Ease of ordering and timeliness of response
 - Patients satisfaction
- ❖ Comments

"I appreciate the amount of time they can dedicate. If I have tried to explain how they need to cease and then someone comes in and spends 45 min discussing only this issue in the hospital I believe some patients have done better."

"I think the tobacco cessation consult service is excellent. Most residents don't have time to spend more than 3 minutes counseling patients on quitting smoking. Patients are seen promptly by counselors and I appreciate the webcis phone message."

"Communication from the provider, response from patients"

"Ease of access, availability in the hospital, quality/skill of tobacco cessation counselor, reputation of program"

Limitations

- ❖ Provider contact information and residents graduating limited response rate
- ❖ No data on those who have not used service

Conclusions

- ❖ Inpatient tobacco cessation consult service widely utilized and highly valued as extension of provider care
- ❖ Presence of consult service positively influences provider counseling and prescribing behaviors
- ❖ Areas for growth include:
 - Offer more education and outreach to increase provider and staff awareness of service
 - Streamline communication with providers
 - Increase staff capacity with additional tobacco treatment specialists
 - Collaborate with key providers to increase integration and expansion in the hospital system