Setting Up a Smoking Cessation Clinic

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Learning Objectives

- To determine the vision, mission, and target population of the smoking cessation clinic
- To introduce the structure, process, and outcomes of setting up a smoking cessation clinic
- To discuss the preparation of hardware and software for setting up the clinic
Learning Objectives

- To identify program models and components of the clinic
- To discuss the evaluation of outcomes
- To examine system change strategies in setting up smoking cessation services
Vision and Mission

- High-quality service
- Compassionate patient care
- Providing the best treatment
- Enhancing quality of life
- Integration of education, research, and clinical practice
Target Population

- General public
- Hospitalized patients
- Outpatients
- Physician-referred
- Self-referred
Program Design

- Adoption of evidence-based clinical practice guidelines (Fiore et al., 2000)
- Routine identification of tobacco use
- Integration into regular provision of care
- Trained smoking cessation counselors—key to service delivery
- Models of counseling
- Evaluation of success
The Structure: Hardware

- **Hardware**
  - The clinic site: hospital, outpatient clinics, community centers
  - Opening hours: office hours, evenings
  - Mode of intervention: face-to-face, telephone, Web-based
  - Resources: staff, budget, equipment, publicity, pharmacotherapy
The Process: Software

- Software
  - Staffing: smoking cessation counselors, administrators, research staff
  - Training: basic, advance, assessments
  - Quality assurance system: case conferences, evaluation, continuing education
  - Follow-up: frequency, measurements
Promotion and Publicity of the Clinic
Training and Preparation of Counselors
The Smoking Cessation Counselor: Responsibilities

- Establish rapport with smoker
- Assess smoking history, nicotine dependence, and readiness to quit
- Develop a clinical impression and prepare a quit plan
- Provide counseling, health education, and relevant advice to the smoker
- Maintain clear and accurate records
- Arrange follow-up
Treatment Components

- Alliance with smoker, develop helping relationship
- Individualized, group, telephone counseling
- Health education materials, Web site
- Addiction philosophy and approaches (e.g., Fagerstrom test)
- Stage-matched interventions
Protect Yourself and Your Children
What to do about second-hand tobacco smoke
Quitline

Youth Quitline
青少年戒煙熱線
28559557

QuitFit 新一代
健康有神采
Program Models: 5As and 5Rs

- **Ask:** identify tobacco use at every visit
- **Advise:** provide appropriate advice (individual vs. group)
- **Assess:** stage of readiness to change
- **Assist:** offer stage-matched interventions or motivational intervention (5Rs)
- **Arrange:** follow-up and relapse prevention or re-engagement
Program Model: 5Rs

- Relevance
- Risks
- Reward
- Road blocks
- Repetition
The Cycle of Stopping Smoking

- Preparing to stop
- Stopping
- Relapsing
- Staying stopped

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Transtheoretical Model of Change

- Pre-contemplation: not ready to change
- Contemplation: thinking about change
- Preparation: getting ready to make change
- Action: making the change
- Maintenance: sustaining behavior change until integrated into lifestyle

Source: Prochaska and DiClemente.
Program Models: AWARD

- Ask
- Warn
- Assess
- Refer
- Do it again
Sample Quit Plan

- Assessment of nicotine dependence (e.g., using the Fagerstrom test) and readiness to quit

- Quit date

- Physical addiction withdrawal management plan
Sample Quit Plan

- Psychological and behavioral management plan
- Social and emotional management plan
- Follow-up and relapse prevention plan
Smoker Makes Appointment to See a Counselor
Health Assessment of Smoker
Carbon Monoxide (CO) Monitoring
Individual Counseling
Group Counseling
Telephone Counseling
Evaluation of Outcomes

- **Structure**: site, equipment, staffing
- **Process**: recruitment, fidelity of counseling intervention, cost-effectiveness
- **Outcomes**: quit rate, quit attempts, smoking reduction, change of stage
- **Biochemical-validated outcomes**: urine or saliva cotinine
System Change Strategies

- Implement a tobacco user identification system in the health care setting

- Promote clinic services through mass media and other communication channels

- Provide education, resources, and feedback to promote the clinic service
System Change Strategies

- Dedicate staff to provide smoking cessation intervention and assess performance

- Include smoking cessation treatments (counseling and pharmacotherapy) in health plans and health insurance

- Reimburse clinicians for delivering smoking cessation treatments and include cessation treatment as part of their job duties
Help Your Clients Quit Smoking TODAY!