

## 5 As of Smoking Cessation for NOTL Family Health Team

### Office Wide Smoking Cessation Program

#### 5A's of Smoking Cessation

#### **Policy Goals:**

- 1) To build on the capacity of NOTL Family Health Team to promote smoking cessation and improve quit rates for our patient population
- 2) To discuss tobacco use and cessation with every patient who smokes tobacco using the 5A's model of minimal contact requiring less than 3 minutes
- 3) All staff are confident and knowledgeable in the implementation of the 5A's model of smoking cessation intervention
- 4) All staff will discuss smoking cessation with patients of the NOTL Family Health Team either in person or on the telephone using the minimal intervention strategy of the 5A's

#### **Definitions**

- 1) 5A Model of Minimal Contact Tobacco Intervention = evidence based approach to tobacco intervention that is advocated in many clinical best practice guidelines, designed to be implemented in less than 3 minutes. The 5A Model consists of Ask, Advise, Assess, Assist and Arrange
- 2) Smoking includes cigarettes, chewing tobacco and contraband tobacco products

#### **Policy Application:**

- 1) This applies to all allied health staff in any interaction with a client in person or on the telephone
- 2) This applies to all support staff if the discussion of smoking cessation is initiated by the patient
- 3) This applies to all physicians during each patient encounter discussing health promotion or acute disease management where applicable

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### **Operational Details**

*Front Reception Staff: (if the topic is identified by the patient the front staff will:*

1. Congratulate the patient in their efforts to think about smoking cessation
2. Ask about smoking status using the 5A's model
3. Offer the most appropriate Canadian Cancer Society pamphlet (ie: 1<sup>st</sup> step to help smokers quit, thinking about quitting, if you want to help a smoker quit)
4. Encourage patient to talk to their health care practitioner
5. Offer the book an appointment in our Smoking Cessation program
6. Obtain consent to complete the Smoker's Helpline Quit Connection referral either in Handouts or printed sheets having the patient fill it out while waiting to see the Health Care Practitioner

*Allied Health Staff:*

1. Talk about smoking status with every patient at every office visit using the 5A's model of intervention
2. Document and update smoking status on the EMR in the risk section
3. Obtain consent to make a Fax referral to the Quit Connection Smoker's Helpline
4. Offer our formal Smoking Cessation program
5. Offer STOP as free NRT along with counseling in our Smoking Cessation program

*Physicians:*

1. Ask about smoking status at each office visit using the 5A's model
2. Document and update smoking status at each office visit in the risk section of the EMR
3. Counsel, prescribe and refer for smoking cessation as appropriate

*Executive Director and Board:*

1. Establish contractual relationship for Faxed Referral status with Smoker's Helpline
2. Review postings for the Provincial YouCanMakeitHappen.ca website
3. Maintain a workplace culture that supports smoking cessation

**Educational/In-service to support policy**

1. Initial Lunch and Learns conducted Jan/14 with all staff on the 5A's model of smoking cessation presented by Public Health community partners
2. Laminated cue cards provided to all staff on the 5A's model of smoking cessation
3. Folder provided to all staff and all new staff with sample questions
4. James, Social Worker, to develop and deliver in-service to all staff on Motivational Interviewing to support smoking cessation behaviour
5. James to provide a video copy of his in-service for all staff as well as students having placements with NOTL Family Health Team
6. Annual refresher training

*Monitoring and Evaluation:*

1. Interdisciplinary Smoking cessation committee to oversee the implementation of and evaluation of the 5A's model of smoking cessation
2. EMR audits to be conducted at 6 & 12 months to review smoking status documentation of all patients in the risk section of the EMR.
3. Data collection by our Billing clerk at 6 & 12 months for smoking status comparing current and ex-smoker status

*Partnerships:*

1. Establish and maintain faxing relationship with Smokers Helpline
2. Continue to develop relationships with Public Health
3. Include and maintain a section of smoking cessation in our NOTL Family Health Team website
4. Have regular articles from Smoker's Helpline and staff of our NOTL Family Health Team in regards to smoking cessation