

Tobacco-Free Partnership of Eau Claire County Garners Solidarity to Help Patients Quit Tobacco

Some of the many task force members who worked to help Eau Claire-area healthcare providers improve tobacco-treatment services are (pictured from left to right): Deb Krahn (Marshfield Clinic), Kristine Hayden (UW-CTRI), Joyce Smith (UW-Eau Claire), Richard Thoun (Eau Claire City-County Health Department), Julie Marlette (Tobacco-Free Partnership of Eau Claire County) and (not pictured): Ann Johnson (Luther Midelfort Mayo Health System), and Greg Spindler (Sacred Heart Hospital).



If you like stories with happy endings, how about this: Once upon a time, a county tobacco-free coalition persuaded all major local healthcare systems, including smaller clinic partners, to not only go tobacco free but also improve the way they help every patient to quit tobacco use. Not only that, they all did it together.

Sound like a fairy tale? It isn't—it's the true story about how the Tobacco-Free Partnership of Eau Claire County, Wisconsin, reached out to local providers with spirited determination. A task force of Partnership members approached local healthcare leaders in 2005 with recommendations on what they could do to help employees and patients quit tobacco use, the No. 1 cause of preventable disease and death in the nation.

These healthcare leaders recognized the need to increase efforts and agreed to act collaboratively in order to send a strong message about health and tobacco use to employees, patients, visitors and the rest of the community. The collaboration was dubbed "Tobacco Free for Health" and efforts were undertaken to make all healthcare campuses tobacco free.

Phase 1: Smoke-free Air

"I think there's always value in getting together and finding out what other healthcare organizations are doing," said Deb Krahn, LPN, task force member and wellness coordinator at Marshfield Clinic, a multi-specialty healthcare system with nearly 800 doctors in 42 locations in Wisconsin. Krahn joined other healthcare professionals on the Tobacco Free for Health task force to coordinate efforts to go tobacco free. She said the collaboration made it easier to promote the idea up the ranks of command at each organization.

When the community works together it's easier to say, "This is something we need to do, we don't want to be left behind," Krahn said. "It's encouraging and motivating."

Julie Marlette, coordinator of the Tobacco-Free Partnership and the task force facilitator, said it also helped providers know they weren't going out on a limb by going tobacco free. Marlette warned, though, that it's just the first step to enacting systems change. "The task force members were the catalyst, but unless you push it up to the decision makers (at the healthcare organizations), there's only so much you can accomplish."

That's one key place where Richard Thoune, director of the Eau Claire City-County Health Department, was able to help. Thoune connected with healthcare system CEOs and medical directors to ensure they were on board. Leadership from the local healthcare systems and clinics conducted a joint news conference to announce plans to tackle tobacco and show solidarity. "You don't want to NOT be there," Thoune said. "It's important to see leadership visibly take a stand to support internal systems change. It moves down from there through each organization."

"It sends a message to the community that competing healthcare providers can work together rather than always trying to 'one-up' each other," said Joyce Smith, a task force member from Marshfield Clinic who now works at UW-Eau Claire's Student Health Service.

Phase 2: Helping People Quit Tobacco

Once the healthcare facilities were completely tobacco free (Phase 1) and had offered treatment programs to their employees who used tobacco, it made it much easier to approach providers about helping patients to quit (Phase 2). Thoune said it's harder to convince people to quit while healthcare facilities still allow tobacco use on their campuses.

Members of the original task force approached the Tobacco Free for Health organizations again, this time to help providers improve their systems to implement the U.S. Public Health Service Clinical Practice Guideline: *Treating Tobacco Use and Dependence*. Kristine Hayden, the local outreach specialist from UW-CTRI, provided training and technical assistance to providers.

They dubbed Phase 2, "Every Patient, Every Visit," encouraging all providers to address tobacco use every time they see a patient. The Guideline provides a blueprint of five steps to help patients quit, known as the 5 A's: Ask about tobacco use, Advise patients to quit, Assess willingness to quit, Assist with quitting, and Arrange for follow-up.

Trouble is, implementing this simple plan can become complicated once one considers the quirks of various healthcare settings. For example, implementation at a large system such as Marshfield Clinic is quite different from a stand-alone clinic or hospital. "I always say, 'One size doesn't fit all,'" Marlette said.

Marshfield Clinic incorporated the 5 A's into their electronic medical record, which is now being piloted so staff could quickly assess tobacco-use status, offer treatment and track results. Meanwhile, Sacred Heart Hospital centralized the tobacco-treatment duties in its respiratory-therapy department via a referral program. "Working with the task force, Sacred Heart is expanding identification and treatment of those with nicotine addiction," said Greg Spindler, director of respiratory medicine at Sacred Heart Hospital. "Using comprehensive questioning and a more targeted educational model, we feel we are able to reach many more patients who are interested in quitting tobacco. While we are still working out the bugs, we are hearing positive comments from the patients that we have encountered."

"Each organization had to sort it out within their systems," Thoune said. "I think if you're able to get people to quit tobacco, you're successful no matter how you do it."

Educating Staff

Another key, Krahn said, was educating clinicians and patients on treatment options. "Some clinicians weren't aware of resources such as the Wisconsin Tobacco Quit Line," Krahn said. The Quit Line is available to any Wisconsin resident by calling 1-800-QUIT-NOW. Krahn said some clinicians were hesitant to address tobacco because they may not be familiar with how to connect the patient with the variety of resources available.

"Sometimes it's simply a matter of helping clinicians link patients to existing services," Thoune said.

However, systems change can sometimes be challenging, Hayden said. "It's an ongoing process."

But it's work well worth doing, Marlette said. "I know of someone whose father died of lung cancer resulting from years of smoking. No healthcare provider ever asked him about smoking until just a few years before his diagnosis. To me, that's tragic and simply not acceptable." And it's something that healthcare providers are working hard to make sure never happens in Eau Claire County.

