

2014 OHIP Work Group Quarterly Report
1st Quarter (July - September); SFY Ending June 30, 2014



Work Group Name: Tobacco Use Prevention Workgroup

Work Group Goal: Increase the percentage of Oklahoma adults and youth who successfully quit tobacco use

Result Objective	Target Completion Date	Actual Completion Date	Accountability (Lead Person(s) Responsible)	Measure	Progress
<p>1. By January <u>2018</u>, increase the number of hospitals <u>and health systems (by 15)</u>, health care professionals, and community-based clinics <u>(by 20)</u> that effectively implement the Public Health Service Clinical Practice Guideline for treating tobacco dependence</p> <p><i>Baseline: under development</i></p> <p>a) Work with hospitals to implement policies and systems that assure routine, systematic identification of and intervention with tobacco users (minimally to include “Ask, Advise, and Refer” protocols).</p> <p>b) Work with health care professional associations to promote routine, systematic identification of and intervention with tobacco users.</p> <p>c) Work with community-based clinics (including IHS and Tribal Health facilities) to implement policies and systems to assure routine, systematic identification of and intervention with tobacco users.</p> <p>d) Include tobacco dependence treatments (both counseling and medication) identified as effective in national guidelines as paid or covered services for all subscribers or members of health insurance packages.</p> <p>e) <u>Add behavioral health aspect</u></p>	<p>January 2018</p>		<p>Lead:</p> <p>a) Oklahoma Hospital Association</p> <p>b) OSDH, OK State Medical Assoc., OK Osteopathic Assoc.</p> <p>c) OSDH</p> <p>d)</p> <p>e)</p>	<p>Measures:</p> <ul style="list-style-type: none"> • Number of hospitals and health systems implementing Guidelines • Number of health care professionals implementing Guidelines • Number of community based clinics implementing Guidelines 	<p>Efforts in all hospitals in Oklahoma are continuing. There have been 6500 fax referrals to the Oklahoma Tobacco Helpline since 2010. OHA is working to add a new hospital system in Tulsa. Mercy is making a large change to their electronic medical records in January which will affect all hospitals in their system throughout four states.</p> <p>The Tribal Liaison department at OSDH is working with Chickasaw Nation to implement guidelines. They are beginning training now which will include both inpatients and outpatients.</p> <p>The objective was updated by changing the underlined items.</p>

<p>2. By January <u>2018</u>, increase tobacco-free properties at all workplaces including private businesses (<u>10%</u>), state agencies (100%), tribal governments (<u>25%</u>), local governments (<u>30%</u>), hospitals (<u>60%</u>), school districts (<u>90%</u>), universities and colleges (<u>90%</u>), career tech centers (<u>40%</u>) and faith-based organizations (<u>10%</u>).</p> <p><u>Baseline Updated (May 2012):</u></p> <ul style="list-style-type: none"> • Private Businesses – 1% (estimated) • State Agencies – 100% (effective Aug 2012 – Veterans homes given extension) • Tribal governments – 5% (2/39) • Local government – (working on baseline) • Hospitals – 38% (50/133) • School Districts – 49% (264/537) • Universities and Colleges – 29% (19/64) * 100% effective Aug 2012 • Career Tech Centers – 12% (7/57) • Faith-based organizations – 1% (estimated) <p>a) Develop a database to establish baseline and track tobacco-free properties.</p> <p>b) Involve state and local partners in promoting awareness and utilization of the Oklahoma “Certified Healthy Business” program which requires all companies /workplaces seeking to achieve the highest level of certification (Certificate of Excellence) must have in effect a 100% tobacco-free workplace policy that applies to the entire property under their control, both indoors and outdoors.</p> <p>c) Involve state and local partners in promoting full implementation of the policies and practices outlined in the “Make It Your Business for a Strong and Healthy Oklahoma” toolkit.</p>	<p>January 2018</p>		<p>Lead:</p> <p>a) OSDH b) Turning Point c) OSHD (THD, OCCHD)</p>	<p>Measures:</p> <ul style="list-style-type: none"> • Number of businesses with tobacco free policies • Number of state agencies with tobacco free policies • Number of tribes with tobacco free policies • Number of local governments with tobacco free policies • Number of hospitals with tobacco free policies • Number of school districts with tobacco free policies • Number of colleges/universities with tobacco free policies • Number of career techs with tobacco free policies • Number of faith based organizations with tobacco free policies 	<p>The group decided to readjust the objective to include the following more attainable percentages by January 2018:</p> <ul style="list-style-type: none"> • Private Businesses – 10%/yr • State agencies – leave at 100% • Tribal governments – 25% • Local governments – 30% • Hospitals – 60% • School districts – 90% • Universities and Colleges – 90% • Career Tech centers – 40% • Faith based organizations – 10%/yr
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<p><u>3. Increase the percentage of smokers utilizing Oklahoma Tobacco Helpline services (treatment reach) to 6% by January 2018.</u></p> <p><i>Baseline: current reach is 4.4%</i></p> <ul style="list-style-type: none"> a) Promote Helpline services through hospital referral systems for their clients. b) Promote Helpline services through local, county and statewide media efforts c) Raise awareness of Helpline services among youth and young adults. d) Explore the feasibility of point of sale advertisements for Helpline in retail establishments. e) Further increase collaborative efforts with tribal health partners and representatives of other disparate populations. 	<p>January 2018</p>		<p>Lead:</p> <ul style="list-style-type: none"> a) Oklahoma Hospital Association b) TSET and partners/coalitions c) TSET and partners/coalitions d) TSET and partners/coalitions e) OSDH Dept. of Tribal Liaison 	<p>Measures:</p> <ul style="list-style-type: none"> • Number of current smokers that utilize Oklahoma Tobacco Helpline services 	<p>The group decided it would be more beneficial to track the number of smokers who are utilizing services to quit instead of focusing on registered callers, therefore the objective was changed accordingly.</p> <p>There is also interest in tracking the number of tobacco users that make quit attempts, even if it is not through the Oklahoma Tobacco Helpline services. This data is collected through the BRFSS.</p>
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Co-Chairs: Tracey Strader, Tobacco Settlement Endowment Trust
Jennifer Lepard, Oklahoma State Department of Health

Team Members: Ann Roberts, INTEGRIS Health Center
Bob Miner, staff, Oklahoma State Department of Health
Bob Wright, American Lung Association
Connie Befort, Tobacco Settlement Endowment Trust
Corey Love, staff, Tulsa Health Department
D'Elbie Walker, Oklahoma State Department of Health
Doug Matheny, Volunteer
James Allen, Oklahoma Department of Mental Health and Substance Abuse
Jessica Hawkins, Oklahoma Department of Mental Health and Substance Abuse
Joy Leuthard, Oklahoma Hospital Association
Joyce Morris, staff, Oklahoma State Department of Health
Julie Bisbee, Tobacco Settlement Endowment Trust
Julie Cox-Kain, Oklahoma State Department of Health
Keith Kleszenski, Central Oklahoma Turning Point
Keith Reed, Oklahoma State Department of Health
Laura Beebe, Oklahoma Tobacco Research Center
Lynette McLain, Oklahoma Osteopathic Association
Melissa Johnson, Oklahoma State Medical Association
Michelle Terronez, staff, Oklahoma City-County Health Department

Neil Hann, Oklahoma State Department of Health

Pat Marshall, American Cancer Society

Randle Lee, Oklahoma Alzheimer's Association

Sjonna Paulson, Tobacco Settlement Endowment Trust

Steve Buck, Oklahoma Department of Mental Health and Substance Abuse

Steve Rogers, Oklahoma State University

Yvon Fils-Aime, Oklahoma Department of Mental Health and Substance Abuse