



Promoting Smoke-Free Families Program

5th Annual
CHSA Health Institute Conference

April 28, 2010

Burbank, California



Promoting Smoke-Free Families Program

A Collaboration To Reduce Smoking Among Pregnant Women- Part 2

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Promoting Smoke-Free Families (PSFF) Prenatal Program

- Only tobacco intervention program in Contra Costa County that is funded by First 5 with tobacco tax money
- Sponsored by the Family, Maternal and Child Health Programs
- Modeled after the San Diego Partnership for Smoke-Free Families- *“Implementation of Pregnancy-Specific Practice Guidelines for Smoking Cessation”*



Promoting Smoke-Free Families (PSFF) Prenatal Program

- PSFF is a preconception or interconception model to improve perinatal outcomes (i.e. have healthier babies).
- Intent is to work with women prior to pregnancy & support healthy habits and/or improve health in general so that women have healthier babies (“Life Course Model”).



Promoting Smoke-Free Families (PSFF) Prenatal Program

- PSFF works with prenatal, Labor & Delivery, and pediatric providers to assure that families receive a consistent harms-reduction message.
- One of the best testimonials was from a client who said that she had *“received the PSFF message from her prenatal care provider and then from her newborn’s pediatrician”*.



Promoting Smoke-Free Families (PSFF) Prenatal Program

Goal:

To train Comprehensive Perinatal Services Providers (CPSP) to address tobacco use and exposure to secondhand smoke.



Promoting Smoke-Free Families (PSFF) Prenatal Program

- PSFF is proud to work with the California Smokers' Helpline (CSH). According to CSH, "Most of the referrals for telephone counseling of pregnant women...comes from the Contra Costa County PSFF Program."
- CSH has recognized our perinatal continuum of care as a "Model of Care".



Partnership Between PSFF and the California Smokers' Helpline (CSH)



How Do Pregnant Smokers Get Linked to CSH?

- 1) Pregnant patients complete and sign the PSFF tobacco assessment form. Provider then sends to PSFF for processing.
- 2) PSFF faxes the tobacco assessment forms of patients identified as smokers to CSH.
- 3) Pregnant smokers are then contacted by CSH and invited to participate in a free telephone-based cessation program designed for pregnant



Public Health Services Clinical Practice Guidelines for Smoking Cessation

- A **5-step** smoking intervention proven effective for pregnant women
- Adapted for:
 - Smokers
 - Spontaneous quitters
 - Exposed to secondhand smoke
- Improve quit rates: **30%-70%**



5A's

ASK

ADVISE



ASSESS

ASSIST

ARRANGE



ASK

Your Health Is Important To Us

Name: _____ Today's Date: _____
Phone at home: (_____) _____ Work: (_____) _____
Address: _____ City: _____ Zip: _____
Your Date of Birth: _____ Race/Ethnicity: _____
Prenatal Care Office: _____
Date of first day of last menstrual period (mo/day/year): _____

1. a. How many people (including you) live in your home? _____ (write in number)
b. How many of those people are 0-5 years of age? _____ (write in number)

2. Please check the box next to the statement that best describes you

I smoke now.
 I smoke now, but cut down after I learned I was pregnant.
 I smoke from time to time.
 I quit smoking after I learned I was pregnant.
 I don't smoke.
 I chew tobacco.

3. During the past seven days how many cigarettes did you smoke on an average day?

_____ Number of cigarettes (write in number).
_____ Less than one cigarette each day.
_____ Did not smoke at all.

4. a. How many smokers live in your home? (Include yourself, if you smoke).
 0 1 2 3 or more

b. Where is it okay to smoke in your house?
 everywhere only in specified rooms nowhere in the house

To help my baby and me stay as healthy as possible, a counselor from California Smokers' Helpline may contact me to ask if I or one of my family members would like to join a free stop smoking program. I understand that this form contains personal information about my smoking status. I have read the information on the back of this form and agree to let my doctor release information from this survey to Contra Costa Public Health to share this survey with a stop-smoking counselor from California Smokers' Helpline. I also give permission for the counselor to share information with my doctor. I understand that the care I get from my doctor will not change if I do not sign my name below.

Patient Signature: _____ Date: _____

White Copy: Please fax to: FPMCH @ (925) 313-6479 or if mailing send to: PSFF 597 Center Ave., Suite 365, Martinez, CA 94553.
Yellow Copy: Please place inside patient's chart. for additional materials, please call (925) 313-6975.
Made possible with funding from First 5 Contra Costa

Content adapted from material developed by the Partnership for Smoke-Free Families, a tri-lateral Partnership project of Children's, Sutter, and Sharp Health Care. Adapted with permission, 2004.

Tobacco Status

Current Smoker

Former Smoker

Secondhand Smoke

None

PSFF Tobacco Status Stamp

PSFF Tobacco Assessment Form



ADVISE

Prenatal Tobacco Advice Grid



PROMOTING SMOKE-FREE FAMILIES

For initial diagnosis see "Your Health Is Important To Us" health survey.

ASK (Diagnosis)	ADVISE (Treatment)	ASSIST (Referral)
<p>Smoker: Patient currently smokes</p>	<p>I see from the health survey form that you filled out that you are currently smoking. I know it is not an easy thing to do, but it is one of the most important things you can do for your baby and yourself. Women who smoke during pregnancy can have less healthy babies. Because I want you to have the healthiest baby possible, I strongly advise you to stop smoking.</p>	<p>I can assist you in quitting smoking. I would like to refer you to the Smokers' Help Line. This is a free program and trained telephone counselors can work with you to make and follow a plan to quit smoking. Please call the number on this prescription today. We can talk more about this on your next visit.</p>
<p>Reduced Smoking: Patient smokes now but cut down after she learned she was pregnant</p>	<p>I see from your health survey form that you have cut down on your smoking. This is a good first step. However, smoking is not good for you and it can harm your baby. Because I want you to have the healthiest baby possible, I strongly advise you to quit smoking completely.</p>	<p>I can assist you in quitting smoking. I would like to refer you to the Smokers' Help Line. This is a free program and trained telephone counselors can work with you to make and follow a plan to quit smoking. Please call the number on this prescription today. We can talk more about this on your next visit.</p>
<p>Smokes Intermittently: Patient smokes from time to time</p>	<p>I see from your health survey form that you smoke from time to time. Smoking can harm your baby. Now is a very good time to give up smoking completely.</p>	<p>I can assist you in quitting smoking. I would like to refer you to the Smokers' Help Line. This is a free program and trained telephone counselors can work with you to make and follow a plan to quit smoking. Please call the number on this prescription today. We can talk more about this on your next visit.</p>

Prenatal Tobacco Advice Grid



PROMOTING SMOKE-FREE FAMILIES

For initial diagnosis see "Your Health Is Important To Us" health survey.

ASK (Diagnosis)	ADVISE (Treatment)	ASSIST (Referral)	ARRANGE FOLLOW-UP
<p>Smoker: Patient currently smokes</p>	<p>I see from the health survey form that you filled out that you are currently smoking. I know that quitting is not an easy thing to do, but it is one of the most important things you can do for your baby and yourself. Women who smoke during pregnancy can have less healthy babies. Because I want you to have the healthiest baby possible, I strongly advise you to stop smoking.</p>	<p>I can assist you in quitting smoking. I would like to refer you to the Smokers' Help Line. This is a free program and trained telephone counselors can work with you to make and follow a plan to quit smoking. Please call the number on this prescription today. We can talk more about this on your next visit.</p>	<p>These two questions can be used to reassess the patient at every visit:</p> <ul style="list-style-type: none"> • Do you smoke? • Do you want to quit? <p>You may consider personalizing the Re-assessment based on the last visit.</p> <ul style="list-style-type: none"> • If the patient has not quit, provide the appropriate treatment recommendation (abuse to quit). • If the patient has quit, congratulate her and let her know the Smokers' Help Line is available if she relapses.
<p>Reduced Smoking: Patient smokes now but cut down after she learned she was pregnant</p>	<p>I see from your health survey form that you have cut down on your smoking. This is a good first step. However, smoking is not good for you and it can harm your baby. Because I want you to have the healthiest baby possible, I strongly advise you to quit smoking completely.</p>	<p>I can assist you in quitting smoking. I would like to refer you to the Smokers' Help Line. This is a free program and trained telephone counselors can work with you to make and follow a plan to quit smoking. Please call the number on this prescription today. We can talk more about this on your next visit.</p>	
<p>Smokes Intermittently: Patient smokes from time to time</p>	<p>I see from your health survey form that you smoke from time to time. Smoking can harm your baby. Now is a very good time to give up smoking completely.</p>	<p>I can assist you in quitting smoking. I would like to refer you to the Smokers' Help Line. This is a free program and trained telephone counselors can work with you to make and follow a plan to quit smoking. Please call the number on this prescription today. We can talk more about this on your next visit.</p>	



ASSESS

- **ASSESS** pregnant patient's willingness to either make a quit attempt if she is currently smoking.

Or

- **ASSESS** pregnant patient's willingness to create a smoke-free environment if she is currently exposed to secondhand smoke in the home or car.



ASSIST: Provider Tools

Prescription Pad



CALIFORNIA SMOKERS' HELPLINE

Call 1-800-NO-BUTTS (1-800-662-8887)

Trained telephone counselors are ready to help you become smoke-free.
Monday-Friday: 7 a.m. - 9 p.m. / Saturday: 9 a.m.-1p.m./ Voicemail: 24 hours

Llame gratis al 1-800-45-NO-FUME (1-800-456-6386)

Un consejero le puede ayudar a dejar de fumar.

Lunes a Viernes: 7 a.m. – 9 p.m. / Sábados: 9 a.m. – 1p.m. / Dejar un recado: 24 horas

Signature/Firma

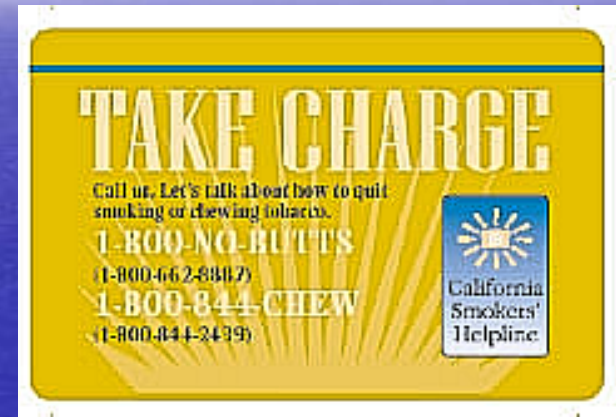


PROMOTING SMOKE-FREE FAMILIES

Made Possible with funding from First 5 Contra Costa

Content created by the Partnership for Smoke-Free Families, a Trilateral Partnership project of Children's, Scripps, and Sharp Health Care. Adapted with permission.

CSH Gold Card



Ask Advise Refer Coverage

Help Your Patients
Quit Smoking

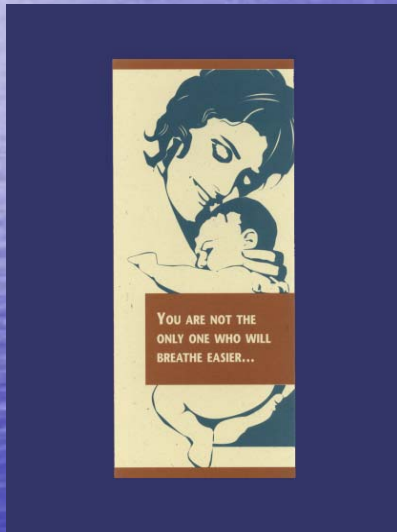
A Guide for Health Care Providers
and Health Educators

Provider Pocket Guide



ASSIST: Patient Health Education

Pregnancy-specific & **secondhand smoke** patient education materials may reinforce the clinician's advice.



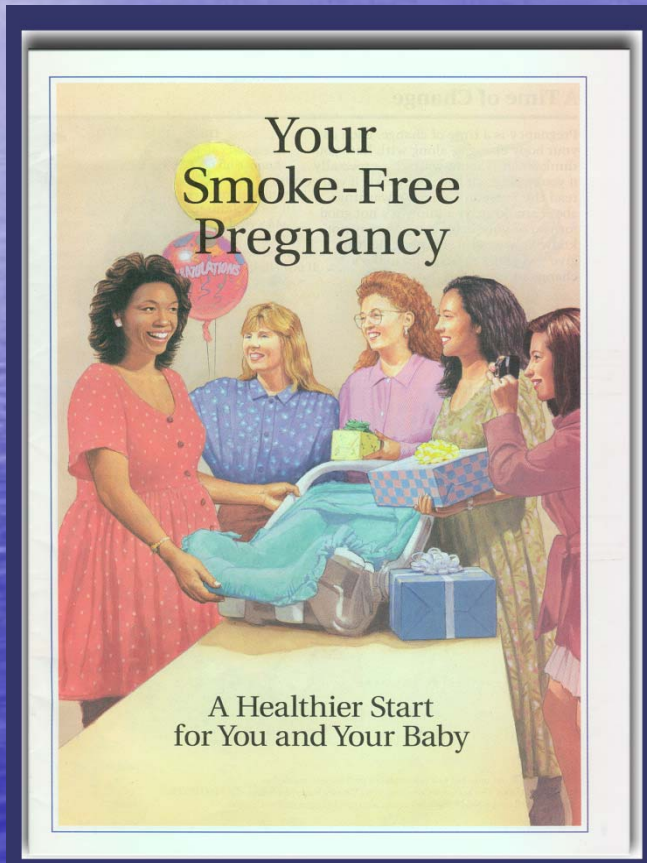
Pregnancy-Specific



Secondhand Smoke



ASSIST: PSFF Mailings- Self-Help Materials for Spontaneous Quitters




SQ-TIP2

SMOKE-FREE FAMILIES:

Tips for Staying *Smoke-Free*

"No thanks - I quit!"



At first, not smoking was new and exciting. Perhaps you got lots of attention and your motivation was high. As time goes by, you may need extra support to resist the temptation to smoke.

Here are some tips to help you stay on track.

Be Prepared To Be Tempted
Unexpected urges to smoke can come when you are in a situation where you used to smoke. *Plan ahead* for what you will do in situations like these:

SITUATION ONE: You meet some old friends you haven't seen for a while. You used to smoke together.
Plan: You can tell your old friends you've quit. They should be glad for you.

SITUATION TWO: You have a bad day and you remember that smoking once helped you cope.
Plan: But did it really? Cigarettes won't change your luck. Go for a walk instead.

SITUATION THREE: You remember that sometimes you enjoyed a cigarette and wonder what "just one" would taste like now.
Plan: Instead, think about the ones that didn't taste good.

Think of a situation that might be hard for you. Now think of a plan for how you will stay smoke-free. Write down both below.

Situation: _____

Plan: _____

Quitting smoking isn't easy. If you don't succeed at first, try again.

You don't have to do it alone. We can help you and your family to become smoke-free.

If you or any of your family members would like FREE help to quit or cut back on smoking, call the Partnership for Smoke-Free Families Helpline (toll free) at: **1-877-866-BABY**

New Ways To Cope

Remember, you are a non-smoker. You can handle stress and cope in new ways. Think of the good things in your life such as your growing baby. Talk with a supportive friend. Reward yourself for your success.


HALT Your Desire

HALT your desire to smoke. Plan ahead and keep yourself from feeling too *Hungry, Angry, Lonely or Tired*.

If You Slip, Get Back On Track

What if you smoke a cigarette? Don't worry. Nobody is perfect. It doesn't mean you are a smoker again. Figure out why you smoked, make a new plan and get back on track.

A Partnership for Smoke-Free Families collaboration by:




ASSIST: PSFF Mailings- Self-Help Materials for Women Exposed to Secondhand Smoke



First Mailing:

Sent to the pregnant client as soon as the PSFF tobacco assessment form is received from the provider.



Second Mailing:

Sent to the pregnant client one month prior to her expected delivery date.



ARRANGE for Follow-Up

- **Follow-up** at each prenatal visit
- Personalize the reassessment based on the last prenatal visit (*i.e. if she has taken steps towards quitting or if she has become more motivated to consider quitting*).
- **Six-week postpartum visit** key opportunity to reinforce information provided to the patient during her prenatal visits.



Evaluation of Prenatal Care Providers

PSFF has several ways of evaluating-

- Training evaluations
- Technical assistance/check-in with providers
- Quarterly reports to providers
- CPSP chart reviews



Sustainability- Integration Into a Public Health System

- Lost funding
- PSFF toolkit on website: www.cchealth.org
- CPSP will continue to monitor in yearly chart reviews for the prenatal component.
- Child Health Disability Prevention Program (CHDP)
Public Health Nurse will monitor in yearly chart reviews for the pediatric component.



Thank You

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