



The Technician’s Role in Tobacco Cessation

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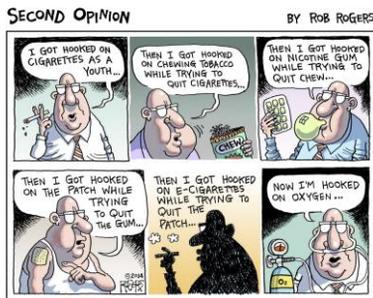
Objectives

- Contrast the tobacco use of patients in North Dakota to the rest of the US
- Identify barriers to implementation of tobacco cessation systems in community pharmacy settings
- Discuss best practices for implementing the “Ask-Advise-Refer” process
- Apply the US Public Health System Clinical Practice Guidelines for tobacco cessation to a patient case
- Design a system to involve pharmacy technicians in the “Ask-Advise-Refer” process in a community pharmacy



Objectives

- The 3 P’s of Pharmacy we will cover:
 - Patient
 - Prescription
 - Professional



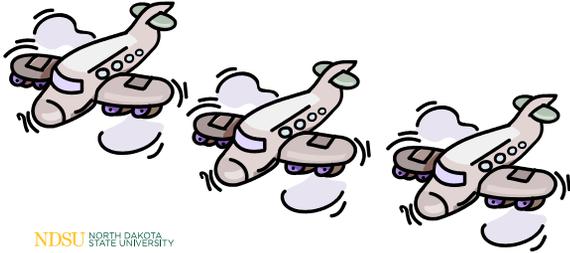
21st Century Forecast

• 1,000,000,000

“Tobacco caused 100 million deaths in the 20th century. If current trends continue, it may cause one billion deaths in the 21st century.”



Deaths/year in US



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ND Statistics*

	North Dakota	National Average
High School Students who Smoke (2017)	12.6% (†)	8%
Male HS students who use smokeless tobacco (2017)	12.8% (†)	5.8%
Adults who smoke (2016)	19.8% (†)	15.5%

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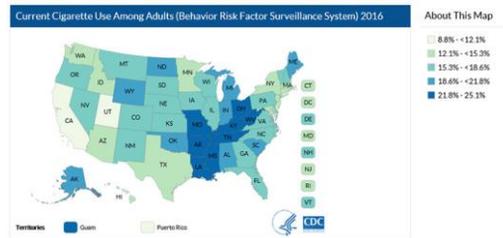
*Tobacco use at least once in the past 30 days
ND Behavioral Risk Factor Surveillance System
Centers for Disease Control and Prevention

ND Statistics*

	North Dakota	National Average
High School Students who use ENDS (2017)	19.1%	11.3%
HS Student Quit Attempts (2017)	50.3% (†)	45.5%
Adult Quit Attempts (2016)	52.5% (†)	55.4%

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*Tobacco use at least once in the past 30 days
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Centers for Disease Control and Prevention State Tobacco Activities Tracking & Evaluation (STATE) System. <https://www.cdc.gov/statestems/cigaretteuseadult.html>

Tobacco is still a problem...



Embargoed until 1:00 PM, ET
Thursday, November 10, 2016

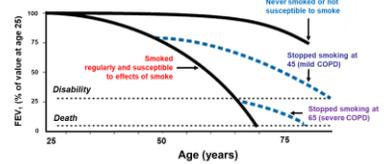
Contact: CDC Media Relations
(404) 639-3286

Cancers linked to tobacco use make up 40% of all cancers diagnosed in the United States
Adult cigarette smoking is down, but tobacco use is still the most preventable cause of cancer

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Beneficial Effects of Quitting: PULMONARY EFFECTS

AT ANY AGE, there are benefits of quitting



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Reprinted with permission. Fletcher & Peto. *Br Med J* 1977;1(6077):1645-1648.

Barriers in the community pharmacy



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Barriers Pharmacy Technician



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Barriers

- **Let's discuss!**
- **Identify 3 barriers to providing comprehensive cessation services to your patients**

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Clinical Practice Guidelines for Treating Tobacco use and Dependence

- **Released** 2008
- **Sponsored** by the AHRQ (Agency for Healthcare Research and Quality) of the USPHS (US Public Health Service) with:
 - CDC (Centers for Disease Control)
 - NCI (National Cancer Institute)
 - NIDA (National Institute for Drug Addiction)
 - NHLBI (National Heart Lung & Blood Institute)
 - RWJF (Robert Wood Johnson Foundation)



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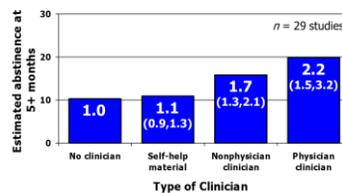
Clinical Practice Guidelines for Treating Tobacco use and Dependence

- **More Recently:**
 - USPSTF Behavioral and pharmacotherapy interventions for tobacco smoking cessation in adults, including pregnant women. *Ann Intern Med* 2015 Sep 22; 163:622.
 - CDC Best Practices 2014



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Effects of Clinician Interventions



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Fiore et al. *Treating Tobacco Use and Dependence: Clinical Practice Guideline*. Rockville, MD: USDPHS, PHS, 2000.

Why Should Clinicians Address Tobacco?

- Tobacco users expect to be encouraged to quit by health professionals.
- Screening for tobacco use and providing tobacco cessation counseling are positively associated with patient satisfaction (Barzilai et al., 2001; Conroy et al., 2005).

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Make a Commitment

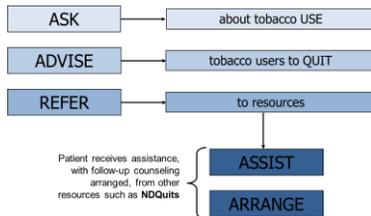
Address tobacco use
with all patients

At a minimum,
make a commitment to incorporate brief tobacco interventions as part of routine patient care

Ask, Advise, and Refer (AAR)

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Brief Counseling: Ask, Advise, Refer



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Clinical Systems Enhancements in the Pharmacy

- USPHS Guidelines
 - 4 “System Strategies”
 - Strategies are designed to facilitate institutional change to promote tobacco dependence treatment

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Systems Strategy 1: Implement a tobacco user identification system in every pharmacy

- Identify tobacco use status of every patient at every encounter
- Tobacco use as a “vital sign”
- Integration into patient intake process and patient health records
- Satisfies “Ask” component of AAR

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Systems Strategy 2: Providing adequate training, resources, and feedback to ensure that providers consistently deliver effective treatments

- Seek training and ongoing support
- Educational and program materials
 - How to reorder materials
- Satisfies “Advise-Refer” components of AAR

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What is “NDQuits”?

- Tobacco cessation counseling, provided at no cost via telephone to all Americans (NDQuits in North Dakota); web-based, phone app
- Staffed by highly trained specialists
- Personalized, confidential counseling sessions
- FREE two month supply of nicotine patches, gum or lozenges
- 30-40% success rate for patients who complete sessions

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Systems Strategy 3: Dedicating staff to provide tobacco dependence treatment and assessing the delivery of this treatment in staff performance evaluations

- Identification and description of Site Champions
 - *Site Champions help to increase clinic referral rates*
- Recommend process and procedures into pharmacy procedure or policy manuals; in staff orientation, on the job training materials.

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Systems Strategy 4: Promote pharmacy policies that support and provide pharmacy tobacco dependence services

- **Mission:** Achieve the outcome of tobacco cessation referral for patients interested in quitting
- Difference between AAR and counseling in relation to payment.
- Recommend tobacco-free grounds policies
 - Refer to LPHU

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Chiropractor Change Study

- Several NDSU faculty led by Kelly Buettner-Schmidt in Nursing developed an intervention study to train chiropractors in eastern ND for tobacco intervention.
- All chiropractors in the region were invited to participate.
- Six practitioners fully participated over the planned 6 month study.
- We measured baseline practices, educated them on AAR and how to change their workflow systems, then monitored for 6 months after training.

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Chiropractor Change Study

Specific aims:

1. To create health systems change based on the integration of the USPHS Guidelines and current scientific literature into chiropractor clinics in eastern North Dakota.
2. To demonstrate that chiropractic health systems change can improve tobacco cessation in terms of quit attempts and successful quitting.
3. To determine the methods and materials needed for statewide implementation and sustainability of the chiropractor health system change.

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Study Results

- 3 solo practitioners, 3 were in a group practice with a single partner.
- They had an average of 222 patient visits per month.
- 1/6 at baseline never “Ask”ed; After study implementation increased to ≥ 50% “Ask rate”
- 1/6 at baseline “Ask”ed 35% of the time; After study implementation, increased to 100% “Ask rate” after 3 months

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Study Results

- 0/6 performed "Advise" component at baseline
 - 104 tobacco users identified
 - 5/6 clinics achieved \geq 50% "Advise rate" most months, and 2/6 clinics achieved \geq 50% "Advise rate" for 2 consecutive months (formal definition of systems change)
- Variable results with "Refer" component
 - Systems change not achieved

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Potential Pharmacy Study

- If funding can be identified, we hope to do a similar study with pharmacies.
- We KNOW pharmacies can do better!

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Evidence of Advanced Technician Roles

- "Advancing the role of the pharmacy technician: A systematic review"
 - Journal of the American Pharmacists Association. Jan 2018, 58(1): 94-108
 - "...if the aim of pharmacy service is to provide patient care and optimize medication delivery, organizations should consider whether they are underutilizing technicians who are capable of performing more patient care activities"

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Evidence of Advanced Technician Roles

- "Advancing the role of the pharmacy technician: A systematic review"
 - UK: Technician-led breast cancer clinic; warfarin dosing
 - Netherlands: Med reconciliation and antithrombotic recommendations pre-surgery
 - US: Integration in outpatient clinics (infectious disease clinic saved \$700,000 for patients through assistance programs)

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Evidence of Advanced Technician Roles

- NDAC 61-04-13
 - "Pursuant to NDAC 61-02-07.1-05, screening a patient for consultation on a refilled prescription can be completed by a registered technician."
 - Assessment must include (among other things): "asking appropriate open ended questions on the medication and their applicable health condition"
 - Problematic responses trigger pharmacist consultation

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Let's Design a Plan!

- See handout...

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Patient Case

- 38 yo male presents to your pharmacy to pick up a refill of his olanzapine 5 mg PO once daily. You notice that he has Medicaid Rx insurance coverage.

QUESTIONS???

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