

Guiding staff and patients down the Smoking Cessation Clinical Pathway

**Organisation Name: Metro South Hospital and Health Service, Brisbane,
Queensland**

Presenter: Ms Deepali Gupta

**HRT 1520 Innovations Workshops and Awards
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Summary- Implementation of the Smoking Cessation Clinical Pathway in Metro South Health

Key Problem:

Smoking is a significant health problem. There was a disconnect between assessment and care planning for hospitalised smokers.

Situation:

Audits showed poor utilisation of Nicotine Replacement Therapy (NRT)- (with 20%-30% smokers offered therapies), and poor use of the smoking cessation clinical pathway (10% of smokers commenced). Queensland Health recommended set targets for use of the pathway as a Quality Improvement Initiative from November 2014.

Changes Implemented:

Metro South Hospital and Health Service (MSHHS) supported the employment of 2FTE project officers who adopted a multifaceted approach to pathway implementation, increasing staff knowledge and awareness.

Outcomes: MSHHS has achieved full smoking cessation performance targets since March 2015 and we have shared our strategies state-wide:

- Pathway utilisation tripled- An increase from 102 to 371
- Quitline referrals nearly tripled- An increase from 128 to 300
- NRT offers nearly tripled- An increase from 32% to 89%
- Introduction of Pharmacist and Nurse Initiated NRT
- Increased staff knowledge and confidence
- Increased Clinical Classification (ICD coding) -An increase from 99 to 500

Metro South Health is one of 17 hospital and health services in Queensland and serves an estimated population of 1 million people, or 23 per cent of Queensland's population.



Princess Alexandra Hospital
>800 beds



Logan and Beaudesert Hospitals
Approx 500 beds



QEII Jubilee Hospital
Approx 200 beds



Redland and Wynnum Hospitals
Approx 200 beds

Map of Metro South Health Service



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Background

Smoking- A leading cause of death and disability; estimated costs for health care exceed \$60m annually in Queensland.



A disconnect in smoking assessment and patient care in hospitals:

- **Past audits in MSHHS showed:**
 - Poor use and uptake of Nicotine Replacement Therapies
 - No standardised process for assessment and care of hospitalised smokers
- **Quality Improvement Payments (QIP) announced by Queensland Health in November 2014 with set targets on use of the Smoking Cessation Clinical Pathway:**
 - The Pathway for hospitalised smokers was developed and endorsed by the QH State Wide Respiratory Clinical Network in 2012; however the uptake was low due to lack of an implementation strategy.



Aims of this innovation

To increase use of the clinical pathway in all inpatient facilities in Metro South Health with aims to:

- Improve care and support for hospitalised smokers:
 - Increase utilisation of evidence based treatment for nicotine withdrawal and encourage quit attempts
 - Increase utilisation of Quitline and other support services
- Achieve Queensland Health Quality Improvement Payments (QIP) targets:
 - Screen at least 50% of admissions as smoker/non-smoker
 - Complete the Smoking Cessation Clinical Pathway in at least 50% of identified inpatient smokers

Action

- Metro South Health supported the employment of 2 FTE project officers in the 2014/15 financial year to the following hospitals:
 - Princess Alexandra Hospital
 - Queen Elizabeth II Jubilee Hospital
 - Logan and Beaudesert Hospitals
 - Redland and Wynnum Hospitals
- Project officers are existing clinical staff who adopted a comprehensive multifaceted multidisciplinary strategy to implement the pathway.

Map of Metro South Health Service

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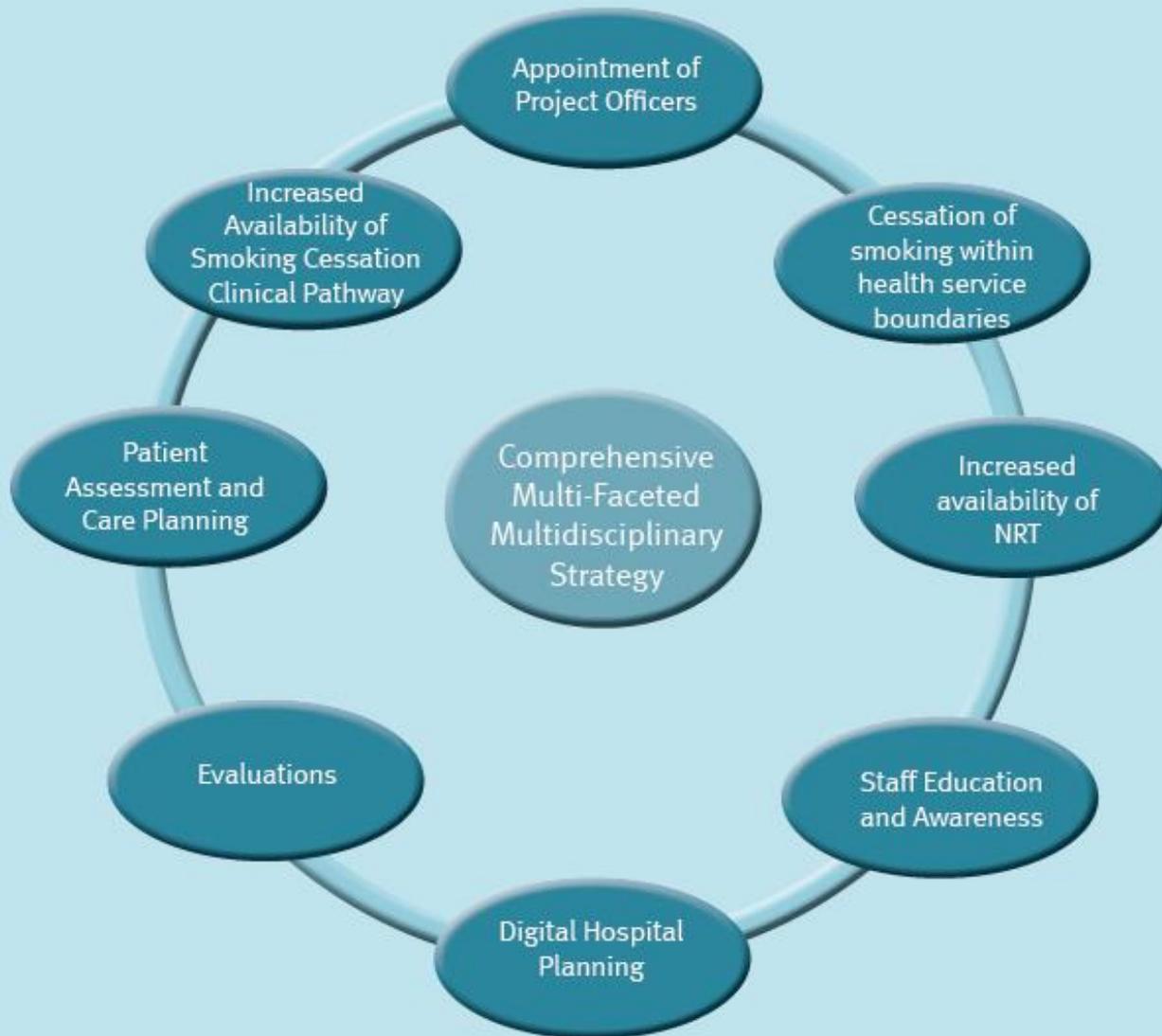
Redland and Wynnum Hospitals
Approx 200 beds



Key Changes Implemented



Intervention



Pharmacist and nurse initiated NRT for inpatients



Section: Clinical

Procedure No. 02288/v1/03/2015

Procedure Title: Smoking Management Policy – Pharmacist and Nurse Ordering Regular Nicotine Replacement Therapy (NRT)

Review Officer: Director of Pharmacy,
Smoking Cessation pharmacist, Princess
Alexandra Hospital

Review Summary: [1st Version](#)

Applicable To: Registered Nurses and
Pharmacists authorised to undertake the
procedure

Date Introduced: 03 2015

Next Review Date: 03 2018

Authority: Drugs and Therapeutics
Committee

Signature of Authorising Officer

Replaces: Nil

Key Words: Nicotine Replacement
Therapy, Pharmacist Initiation, Smoking
Management Policy, Nurse Initiation, NRT,
Smoking Cessation, Clinical Pathway

References: See end of document

Purpose:

- To outline the responsibilities of pharmacists and nurses initiating NRT order.
- To extend the existing Metro South procedure – Metro South Smoking Management Policy and Pharmacist and Nurse initiated medications.
- To promote Smoke-free Healthcare.
- To adopt a uniform approach to ordering of nicotine replacement therapy (NRT) using brief intervention for smoking cessation.

Background:

- The Queensland Parliament passed amendments to the [Tobacco and Other Smoking Products Act 1998](#) (Tobacco Act), prohibiting smoking at all Queensland public and private hospitals and health facilities, and for 5 metres beyond their boundaries, effective from 1st January 2015.^{1,2}
- This procedure is developed to enable registered pharmacists and nurses to formally assess patients with nicotine dependence and provide a safe, effective method of preventing and managing nicotine withdrawal using the [Smoking Cessation Clinical Pathway \(SCCP\)](#).

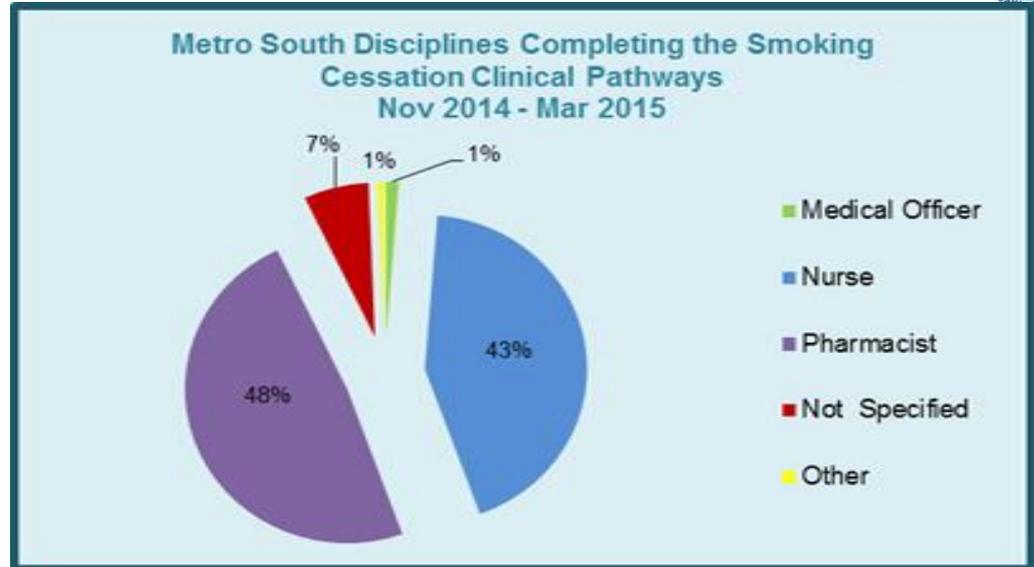
Outcome of the Procedure:

- Patients are assessed appropriately using the SCCP at every presentation to hospital.
- Patients receive timely and continuous NRT while hospitalised, thus preventing nicotine withdrawal and enhancing safety of patients and staff.³
- Relevant assessment and documentation using SCCP for patients receiving NRT in the hospital.
- Uniform and consistent approach to NRT ordering by nurses and pharmacists.

Patient Care Outcomes

1. Multidisciplinary Involvement in smoking assessment and care planning

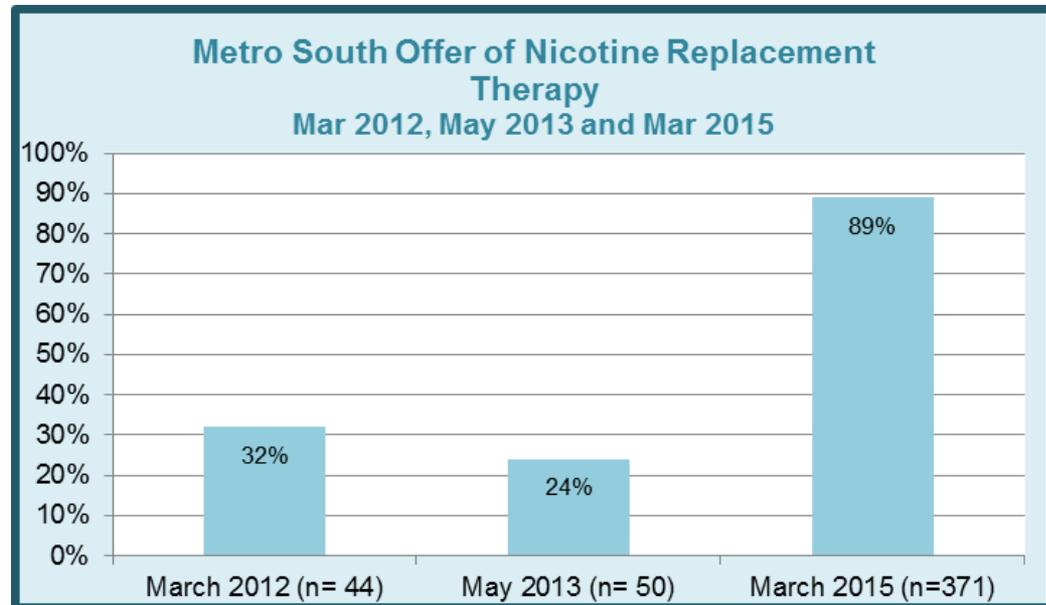
(largest groups were Pharmacy and nursing staff)



2. Increased utilisation of NRT

-NRT offers nearly tripled

-↑ 57% (from 32% to 89%)

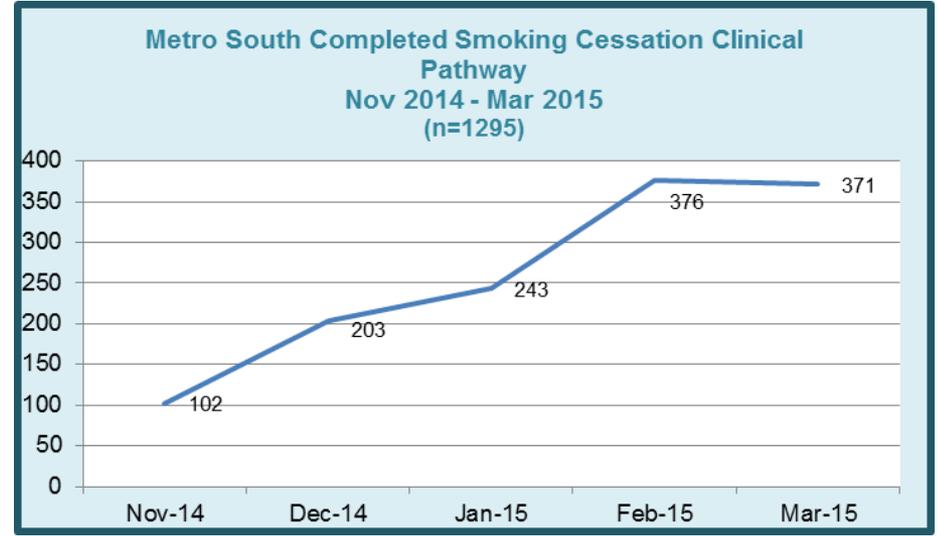


Patient Care Outcomes



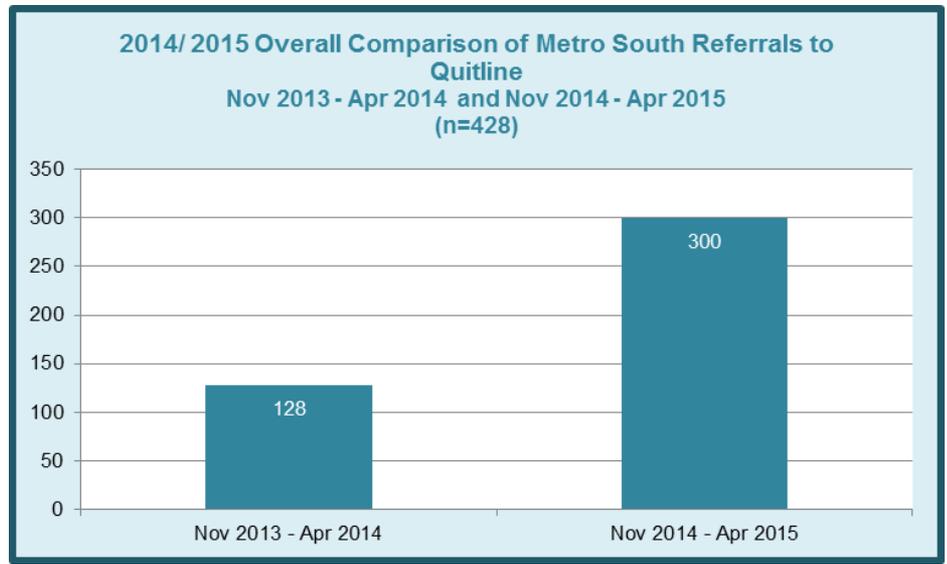
3. Pathway utilisation tripled

- ↑ 270% (from 102 to 371)



4. Quitline referrals nearly tripled

- ↑ 157% (from 128 to 300)



Metro South has highest referrals to Quit line by the Hospital and Health Services in the Queensland

Quitline received 1956 referrals Queensland wide from November 2014 to March 2015. Of these; 12.7% (248 / 1956) were from Metro South which was the highest response by a Hospital and Health Service (HHS) 6.6% (129 / 1956) were from the second highest HHS.

Organisational Outcomes

1. Metro South is **meeting full QIP targets** from March 2015
2. **Increased staff knowledge and confidence** in smoking assessment and care planning
3. **A four fold increase** in Clinical Classification reporting (ICD coding) of Nicotine dependence (400% increase) (see Table-1&2)

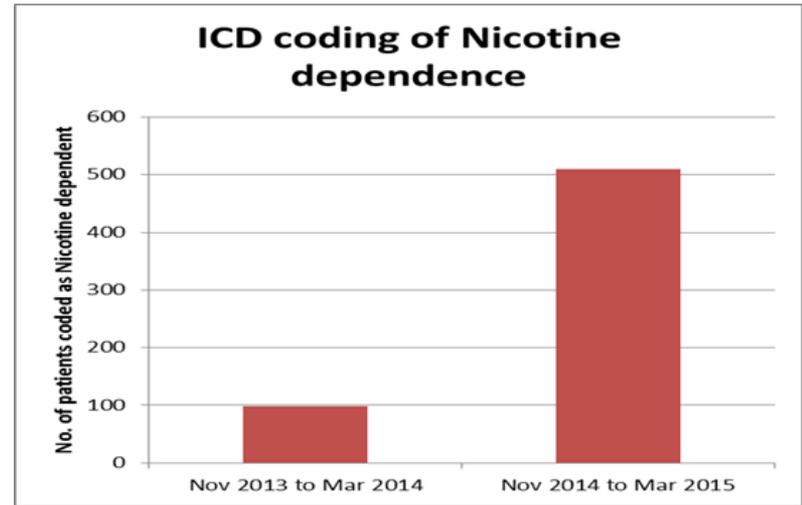


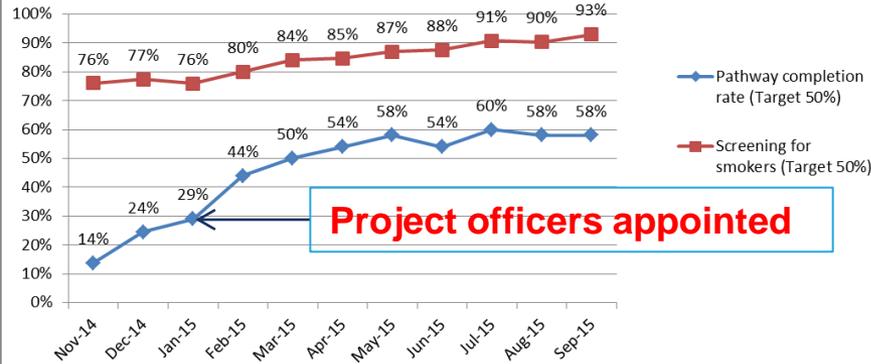
Table 1 - In scope admissions

	2013	2014	2015
Numerator (Number of encounters w F17.2)	432	444	2,627
Denominator (Total in scope encounters)	24,388	24,838	25,122
% Rate	1.8%	1.8%	10.5%

Table 2 - not in scope admissions

	2013	2014	2015
Number of encounters with F17.2	161	183	950

Smoking Cessation QIP performance
Metro South Health



Lessons Learned- Recommendations

1. Completion of the clinical pathway, offering of NRT to patients and Quitline referrals increased after commencement of clinical staff as project officers.
2. Our experience suggests that smoking cessation strategies implemented in hospitals need to be multifaceted and multidisciplinary with ongoing audit and subsequent quality improvement.

Contact for Smoking Cessation Clinical Pathway Implementation in acute inpatient units- Metro South Health



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