

BACKGROUND

For the first time in Oregon, during the 2013 legislative session, Tobacco Master Settlement Agreement (TMSA) funds were designated for tobacco prevention and control. Input from the Conference of Local Health Officials (CLHO), the CLHO Healthy Communities Committee, the Tobacco Reduction Advisory Committee (TRAC), and an expanded group of advisors including representatives from Coordinated Care Organizations (CCOs) and the Governor’s Office resulted in a competitive funding opportunity using a portion of the TMSA funds for Local Public Health Authorities (LPHAs) to advance policy, systems and environmental changes that:

- Promote tobacco-free environments and communities,
- Reduce the influence of tobacco product marketing and promotion, and
- Encourage tobacco users to quit.

LPHAs were encouraged to work with their local CCO, Regional Health Equity Coalitions, Tribes, and other community organizations representing local populations disproportionately impacted by tobacco products to implement recommendations from the Centers for Disease Control and Prevention (CDC) Best-Practices for Tobacco Control.

A consortium of Douglas and Coos County Health Departments was one of six grantees awarded funding to advance tobacco control and prevention efforts in partnership with Adapt—a regional addiction recovery, behavioral health, and primary medical care provider.



Health systems change represents a unique opportunity to increase the likelihood that patients will be consistently screened for tobacco use, advised to quit and provided effective treatment.

SPArC Tobacco-Free Douglas/Coos

Grantee Summary

A strong partnership between public health, primary care, and substance abuse prevention and treatment forms the backbone of SPArC efforts in Douglas and Coos Counties – two Southern Oregon counties with high rates of tobacco use, particularly among low-income community members and people with substance use disorders.

SPArC funding in Douglas and Coos Counties provided a focused opportunity to leverage local and regional partnerships toward integration of comprehensive tobacco prevention and cessation interventions into medical and dental care environments.

SPArC activities in this region are strengthening tobacco-free environment policies, building regional expertise and capacity for the treatment of nicotine dependence, and engaging selected CCO affiliated clinics in an intensive assessment and planning process to strengthen the delivery of nicotine dependence treatment.

KEY STRATEGIES

SPArC projects were designed in response to local needs in tobacco prevention and control; each grantee implemented strategies tailored to their unique context.

Douglas and Coos Counties proposed three main policy and system strategies in their SPArC application:

- 1) Work with CCO partners to establish or strengthen tobacco-free campus policies to meet the 100% gold standard.
- 2) Build local and regional expertise in tobacco and nicotine dependence and treatment to assure and expand the delivery of effective tobacco screening, counseling, and referral.
- 3) Engage “change teams” in medical and dental clinics in an organizational assessment and planning process to ensure a comprehensive approach to tobacco use screening and treatment.

“We have an opportunity and obligation to be role models for health in the community and to talk with our patients about the risks of tobacco use for overall health.”

Change Team Member, Winston Community Dental Clinic-Advantage Dental

SPArC Tobacco-Free Douglas/Coos

PROJECT MILESTONES

HIGHLIGHTS

Strategy 1: Policy

Assessed tobacco policies of CCO affiliated clinics and agencies, providing individualized feedback and support to implement policy enhancements:

- Eight CCO partners in Douglas and Coos Counties adopted or enhanced their tobacco-free campus policies effective January 1, 2015.

Strategy 2: Treatment

Five clinical team members were trained and certified by the Mayo Clinic as Tobacco Treatment Specialists (TTS).

- TTS serve as local experts for clinicians, counselors and administrators and provide integrated clinical support on tobacco use and nicotine dependence.

Strategy 3: Systems

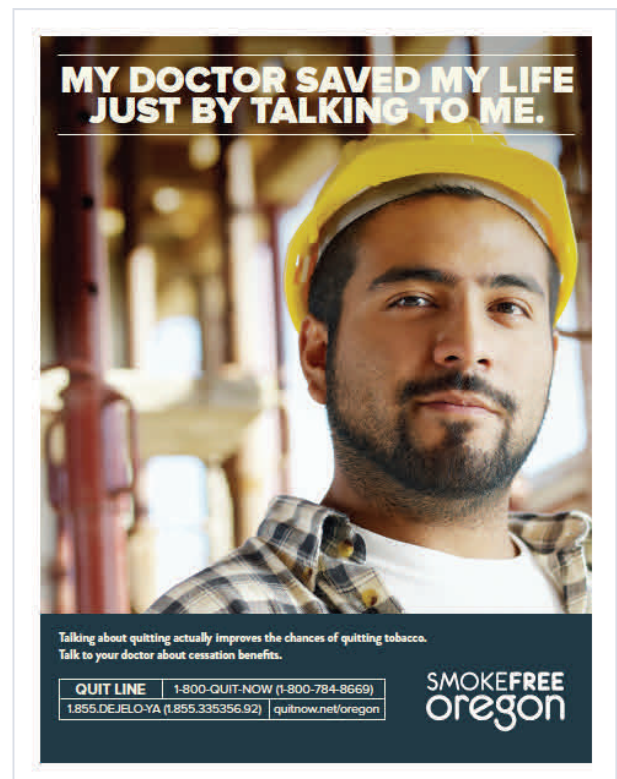
Three primary care clinics and one dental clinic engaged in a comprehensive “change team” experience at their clinics to address tobacco prevention and cessation.

- Change teams conducted system assessments, developed system change plans, and implemented systems and process improvements to facilitate systematic tobacco screening, counseling and referral.

- Advantage Dental tobacco-free policy and systems changes for all clinics in Oregon.
- Adapt—regional addiction recovery, behavioral health, and primary medical care provider in Southern Oregon—providing tobacco and nicotine dependence treatment as clinical standard of care.
- Developed online *Systems Change* resource webpage and educational materials for providers and medical practices.
- Presentations to local and statewide coordinated care leadership committees and professional organizations.

“Our tobacco-free campus policy is adding to the momentum for people to quit.”

Change Team Member, Waterfall Community Health Center



SPArC Tobacco-Free Douglas/Coos

CHALLENGES

- Making tobacco a priority in clinics with multiple patient care priorities, new processes associated with health transformation and staffing changes.
- Electronic Medical Record systems or technology issues that pose barriers to routine and continuous quality improvement reporting.
- Policy and systems change work creates “job creep” for busy clinic staff who have to schedule time typically spent with patients to participate in clinic change activities.
- Inconsistent reimbursement for nicotine dependence as a primary diagnosis.
- Tobacco treatment and cessation must be integrated into an already full menu of existing services.
- One-year grant window insufficient time to design, implement and evaluate policy and systems-level intervention.

LESSONS LEARNED

- Tobacco-free *procedures* facilitate systems change in complex health systems where local clinic may not have *policy* authority.
- Clinic and project champions are critical to facilitate systems change in a clinical settings.
- Timing matters to the success of policy and health systems change:
 - Leadership change and the influx of new OHP patients can be barriers to clinic engagement in new projects.
 - On the other hand, scheduled Electronic Medical Record updates can facilitate clinical system changes.
- Funding health systems initiatives could help elevate tobacco as priority and assist with costs associated with systems change.
- Technical assistance is critical to keep project moving forward and provide expertise that is not available in clinic settings.

“The biggest impact from having gone through the Change Team process is that every time someone sees their doctor, tobacco is being addressed which moves them along in the stages of change toward quitting.”

Change Team Member, SouthRiver Community Health Center

OREGON'S FUNDED PROJECTS

The Strategies for Policy And enviRonmental Change (SPArC) Tobacco-Free competitive Request for Grant Applications (RFGA) directed applicants to:

- Complement, build upon, or accelerate, but not duplicate, the current Local Program Plan of the LPHA(s) Tobacco Prevention and Education Program (TPEP);
- Be achievable and produce a sustainable change within the 15 month grant period of April 1, 2014 through June 30, 2015; and
- Be evaluable to demonstrate advancement of policy, systems and environmental changes in tobacco prevention and control.

Six grantees were funded across the State of Oregon in the following counties:

1. Douglas & Coos
2. Klamath
3. Lane
4. Linn, Benton & Lincoln
5. Multnomah
6. Yamhill

“The SPArC grant has allowed us to mobilize local action to apply what works to address the enormous health burden of tobacco use in Douglas and Coos Counties.”

Marilyn Carter, Ph.D., SPArC Director

Douglas/Coos SPArC Project Partners

Adapt

Advantage Dental

Coos County Health & Wellness

Harvard Medical Park

North Bend Medical Clinic

Rede Group

SouthRiver Community Health Center

Umpqua Health Alliance

Umpqua Regional Medical Center

Waterfall Community Health Center

Western Oregon Advanced Health

Winston Community Dental Clinic

CONTACT

*Prepared for the Health Promotion and Chronic
Disease Prevention Section,
Oregon Public Health Division
by Program Design & Evaluation Services*

Marilyn Carter, Ph.D.
Adapt, SPArC Director
541-672-2691 | marilync@adapt-or.org