

Oregon MCH Title V Priority Area: Smoking

Inputs	Strategies	Sample Activities	Outputs (Process Measures)	Short term outcomes	Intermediate Outcomes
<p>Staffing & expertise</p> <ul style="list-style-type: none">• Programs• Nurse Supervisors, Managers• Home Visitors <p>Funding / resources</p> <ul style="list-style-type: none">• Title V <p>Partnerships within agency</p> <ul style="list-style-type: none">• TPEP• Community Partner Enrollment Assistors• Family Planning• WIC• OMC <p>Community partnerships</p> <ul style="list-style-type: none">• CCOs, DCOs• Providers• Retail Tobacco• Early Childhood Providers <p>Data</p> <ul style="list-style-type: none">• State and National Performance Measures• Community	<p>1. Develop a policy agenda that decreases youth exposure to tobacco products and decreases likelihood for initiation and use.</p>	<ul style="list-style-type: none">- Develop a policy agenda decreasing youth exposure to tobacco for the county.- Collaborate with TPEP staff to work in restricting retail environments in dispensing tobacco to adolescents.- Develop a plan to counter retail price reductions at the county level	<p>1.1 Number of policies developed, implemented or promoted.</p> <p>1.2 Number of partnerships developed or strengthened.</p>	<ul style="list-style-type: none">- Increased capacity across health care and public health to decrease youth and pregnant individuals' exposure to tobacco- Increased provider ability to provide cessation best practices for pregnant individuals- Increased percent of pregnant individuals who use tobacco engaged in smoking cessation programs- Improved understanding by pregnant individuals who use tobacco on how to utilize their health care coverage cessation programs	<p>- National Performance Measure 14A: Percent of women who smoke during pregnancy</p> <p>- National Performance Measure B: Percent of children who live in households where someone smokes</p> <p>- Public Health Accountability Metric: Percent of adults who smoke cigarettes</p>
	<p>2. 5As Intervention and Quit Line Referral (or other customized Evidence-Informed Program) within MCH Programs including Home Visiting, Oregon MothersCare, Family Planning, and WIC (if applicable)</p>	<ul style="list-style-type: none">- Obtain 5As and MI training.- Conduct the 5As intervention at every visit or encounter with an MCH client.- Develop a workplan for implementing and conducting customized, evidenced-based program.- Ensure use of the Five A's Intervention Record Tracking Form for every MCH client.- Ensure that every woman who smokes has received quit line information.- Participate in continuous quality improvement regarding 5As provision to clients.- Promote provider use of quit line fax and EHR referrals for pregnant women who smoke.- Provide incentives to pregnant women for use of the quit line (additional phone minutes).	<p>2.1 Percent of clients receiving 5A's intervention.</p> <p>2.2 Percent of clients referred to Quit Line.</p>		
	<p>3. Collaborate w/CCOs, DCOs, medical and early childhood/education providers to build screening and intervention processes into their work practices, including workforce training.</p>	<ul style="list-style-type: none">- Attend 5As and MI Training to gain screening and referral expertise.- Engage CCOs, DCOs, ELC's and/or medical and early childhood/education providers as partners and encourage building screening and intervention processes into medical practices.- Organize training activities for CCOs, DCOs, ELCs, and/or medical and early childhood/education providers.- Liaison with providers to encourage them to provide consistent, ongoing screening and intervention to clients.	<p>3.1 Number of partnerships developed or strengthened.</p> <p>3.2 Number of processes developed or improved.</p> <p>3.3 Number/percent of providers, partners or staff trained.</p>		<p><u>Long term outcomes</u></p> <ul style="list-style-type: none">- Decreased adverse birth outcomes- Decrease in developmental impacts of tobacco on children- Decrease in infant mortality- Decrease in chronic disease and cancer- Improvement in lifelong and multigenerational health- Improved life expectancy

<div>Health Assessments</div> <div><ul style="list-style-type: none">Community Health Improvement PlansOregon Tobacco Facts</div> <div>Evidence base / best practice</div> <div><ul style="list-style-type: none">Community GuideACOGOregon HERCHealthy People 2020</div>		<div>4. Promote health insurance coverage benefits for pregnant and postpartum women and promote their utilization.</div>	<div><ul style="list-style-type: none">Ensure that MCH population is made aware of tobacco cessation benefits for the Oregon Health PlanDevelop communication messages regarding tobacco cessation benefits for pregnant women.Provide materials to MCH population who smokes enrolling in OHP regarding cessation insurance benefit coverage.</div>	<div>4.1 Number/percent of women educated about insurance coverage.</div> <div>4.2 Number of social media, outreach, or educational campaigns regarding insurance benefits</div>	
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