
TOBACCO CESSATION PROGRAM

This instruction establishes responsibilities and procedures for the administration of the Tobacco Cessation Program at the Health and Wellness Center (HAWC).

1. References:

- 1.1. DOD Directive 1010.10, Health Promotion
- 1.2. AFI, 40-101 Health Promotion Program
- 1.3. AFI 40-102, Tobacco Use in the Air Force
- 1.4. AFI 40-102, AETC Supplement 1, Tobacco Use in the Air Force
- 1.5. American Lung Association, Freedom From Smoking, Guide for Clinic Facilitators

2. Policy:

The Vance AFB Tobacco Cessation Program is targeted to all Vance AFB active duty, dependent, retirees, and DOD civilian personnel. The tobacco cessation program will consist of a telephone consultation service (1-800-548-8252) with a nicotine dependence counselor (Certified Registered Nurse or Respiratory Therapist) from the American Lung Association (ALA). Tobacco cessation aide (zyban) is available to all TRICARE enrollees free of charge. DOD civilians may engage with the telephone consultation service but are not eligible for tobacco cessation aides provided by the 71 MDG Clinic Pharmacy.

3. Responsibilities:

- 3.1. The Health Promotions Manager:
 - 3.1.1. Ensures that all patients enrolled into the ALA program receive their tobacco cessation aids as directed by the nicotine dependence counselor. To ensure that this has been accomplished, patients will be contacted via telephone once an email is received from the ALA with the smoking cessation plan outlined.
 - 3.1.2. Reports all smoking cessation data to the Health Promotion Working Group (HPWG).

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- 3.1.3. Ensures promotion of the program, referring individuals to the program and providing educational materials.
- 3.1.4. Ensures the HPWG focuses on tobacco cessation in a minimum of one monthly national health observance topic (i.e. Great American Smoke-out).
- 3.1.5. Procures appropriate education materials in relation to tobacco cessation and ensures widest dissemination possible.
- 3.1.6. Maintains a list of available tobacco cessation programs/resources on base and in the local area.
- 3.1.7. Provides reports of the Tobacco Cessation Program and tobacco use rates as directed by the Wing Commander and higher headquarters.
- 3.1.8. Updates and advises commanders and supervisors on issues related to tobacco cessation and AETC and AF tobacco cessation programs/policies.
- 3.1.9. Sustains an awareness campaign (articles, posters, briefings, etc.) on the tobacco policy and the hazards of tobacco use.
- 3.2. The Health Promotion Working Group (HPWG):
 - 3.2.1. Support and assist with tobacco cessation initiatives offered by the Health Promotion Program.
 - 3.2.2. Informs the Health Promotion Manager (HPM) and HPWG of any programs or resources related to tobacco cessation.
 - 3.2.3. Monitor and provide feedback on perceived problem areas among the base community.
 - 3.2.4. Advertise and encourage use of tobacco cessation telephone consultation among their organizations.
- 3.3. Medical Liaison Officer:
 - 3.3.1. Oversees the medical components of the Tobacco Cessation Program to include medical curriculum and client assessment for tobacco cessation aides.
 - 3.3.2. Reviews all TRICARE enrolled participant medical history for consideration of desired tobacco cessation aides.
 - 3.3.3. Supports the Tobacco Cessation Program as the primary treatment for tobacco users seen at the 71st Medical Group. Ensures that all medical exam rooms have flyer posted with appropriate phone number listed.

3.4. Referral:

- 3.4.1. Individual tobacco users may self-refer for enrollment into the Tobacco Cessation telephone consultation service with the ALA.
- 3.4.2. Medical providers are encouraged to have flyers with the appropriate phone number available for hand-outs to all interested patients. This will be a self-referral program. The HAWC staff will contact the patient upon receipt of the confirmatory e-mail sent from the ALA. If the patient does not participate in the smoking cessation program as directed by the ALA, an e-mail will be generated informing the HAWC staff of the patients' failure to comply with the recommended course of action for cessation. The patient will be contacted by the HAWC staff to inquire into the patients' readiness to achieve a tobacco free lifestyle.

3.5. Program:

- 3.5.1. The American Lung Association Nicotine Dependence Counselor will be contacted directly by the patient by calling 1-800-548-8252 Monday thru Friday from 0700 to 1900. The patient will have to identify that they are from Vance AFB.
- 3.5.2. Once the patient makes the phone call, an e-mail "SOAP" style note will be generated by the ALA nicotine dependence counselor to the HPM or designated representative. The SOAP note will record the patients tobacco use history and will include an action plan for smoking cessation utilizing smoking cessation aids as deemed necessary by the ALA counselor. This will be determined on a case by case basis.
- 3.5.3. Once the action plan is received, the HAWC staff will contact the MLO or a designated credentialed provider to enter the patients smoking cessation aides into the 71 MDG pharmacy. If the patient is on flying status, the patient must be placed into a do not fly status until evaluated by their respective flight surgeon. When the MLO or designated credentialed provider enters the prescription for smoking cessation aids into the pharmacy, a note will be added onto the prescription indicating that the patient is currently enrolled into the ALA program. The patient will only be given a one month supply of any smoking cessation aid at a given time.
- 3.5.4. The patient will be directed to continue to follow-up with the ALA via the telephone consultation service on a weekly/monthly basis as determined by both the patient and the ALA counselor.
- 3.5.5. An e-mail "SOAP" style note will be generated by the ALA for every patient contact.
- 3.5.6. All e-mail "SOAP" style notes will be printed by the HAWC staff, signed and sent to the MDG to be filed into the patients' medical record.

3.6 Outcome data collection:

3.6.1 Participant cessation rates are determined as follows:

3.6.1.1 Participants must contact the ALA to be counted as an enrollee (denominator).

3.6.1.2 Quit rates among enrollees will be measured at the 6, and 12 month point from the date of cessation or initial phone contact with the ALA. Those remained tobacco free (numerator) are divided by the original enrollment (denominator) to determine the quit success rate.

3.6.1.3 Every effort will be made to maintain contact with members; yet, members lost to PCS or separation will be considered disenrolled for Vance AFB.

3.6.1.4 The ALA will also generate call data for the HAWC upon request

3.6.1.5 Cessation rate outcome data is reported to the HPWG, Prevention Committee, IDSS, and CAIB as scheduled.

ROSE A. POPOVICH, MAJ, USAF, NC
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Reviewed:

Date:
