

Policy Coordination Worksheet
TPCP Contractors' Meeting
January 19, 2006

Venue: Health Care Settings

Facilitator(s): Rebeckah B., Marci N. and Jenna P.

Recorder: Marci N.

Summary: Document created by Tobacco Prevention and Control Program Contractors at the January 2006 statewide meetin. Break-out session participants listed challenges, successes, resources, and partners in health care settings.

Participants:

1. Cassandra B.
2. Ivoni N.
3. Betty S.
4. Isa K.
5. Karisa S.
6. Kurt M.
7. Holly B.
8. Sabrina M.
9. LaDene L.
10. Diane M.

1. What are the key objectives of your work with Health Care Settings?

- Adopting 5As (abbreviated is okay, i.e., ask, advise, refer), but 5As is ideal. How is this evaluated? Advance policy assessment before training on 5As, then conduct policy assessment. Clinic policy needs to describe the process (i.e. ask if patients use tobacco then have 5As on clipboard)
- Electronic Medical Records (can generate the fax referral with patient’s information so you don’t have to write it) to make the “next step” easier once a patient is identified as a smoker; a screen comes up with the next steps.
- Getting them to use the fax referral form
- Distributing TRUTH Network Guide Materials
- Working with healthcare providers that serve disparate populations

2. Identify what’s going well and challenges you are facing:

What’s Going Well!	Challenges
<ul style="list-style-type: none"> • Focus on the clinicians who have more time/contact with patients (usually not the physicians). • Dental hygienists are great to work with • If presenting to doctors, have a doctor present with you • Rebeckah → usually talk to clinic manager first, (ask about intake, who asks the questions) • Clinical social workers • Substance abuse workers • <u>Good materials</u> • Training nurses – website • Empower people to ask their healthcare provider about cessation services in Spanish 	<ul style="list-style-type: none"> • Getting to the doctors (don’t have time, we don’t speak their language) • Materials not in Spanish yet • <u>Patients do not know how to maneuver through the system</u> (Not getting services and resources) • Diversity in health care providers. (Refugees and immigrant workers have a hard time finding somewhere to go and finding health care providers that speak their language)

Notes:

- Maybe work with eye doctors and pharmacists?
- Quit line is relapse people can be eligible for services again in 12 months (no limit for teens), intensive counseling for 12 months.
- 5As for health educators to market 5As and fax referral?

3. List resources you utilize and resources you need to accomplish objectives.

Resources we Utilize	Resources we Need
<ul style="list-style-type: none"> • Fax referral • Truth Network Materials • 5As for clipboard, chart assistance guide • Provider flow chart • 5As presentation • Tear pads 	<ul style="list-style-type: none"> • Spanish cessation classes • List of dental hygienists that are participating in fax referral contest • Updated Quit Line flow chart • Screensaver? of clipboard 5As • Quit Line palm card? • “Foot” in the door with professional organizations/societies <ul style="list-style-type: none"> - Mailing lists - People that we know - Non-profits • Healthcare provider call to action • Check on WIC for referral system (not working in Davis County)

4. Who are your partners on this project and how are you working with them? (Partners can include coalitions, youth, business owners, etc.)

Partner	How we can work with them effectively
CTFU	
Intermountain	
UCAN	
WIC	

5. What are some of the key dates to remember?

CTFU Policy Committee – 1st Monday @10:15 @ the SLVHD Environmental Building

Weber-Morgan Health Department training dental hygienists on January 30th from 9 – 10:30

6. What specific strategies can this group use to communicate effectively over time?

Isa will add everyone in this meeting to the CTFU policy e-mail list. If someone doesn't want to be on the list, contact Isa to take name off of the list.