Nicotine Replacement Therapies to Decrease Withdrawal Symptoms and Improve Patient Experience

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https://knowledgeconnection.mainehealth.org/opex/23

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Project: Nicotine Replacement Therapies to Decrease Withdrawal Symptoms and Increase Patient Experience
Last Updated: 7/17/19

Team Members: Cheryl Pawloski, Holly Stewart, Devon Gillis, Dena Whitesell, Donna Chamoff, Maya Bulman, Chris Racine, Raymond Serrano, Leslie Gatcombe-Hynes, Elizabeth Mullany, Amy McAuliffe, Jayne Weisberg

Smoking is the leading cause of preventable death in the US. To be truly patient-centered, we must encourage our patients to lead the healthiest lives possible and to reduce their chance of preventable disease and death. Offering Nicotine Replacement Therapy (NRT) in hospitals improves the likelihood that a patient will quit. Prescribing NRT within 24 hours of admission to the hospital also decreases the incidence of nicotine withdrawal, which, when left untreated, can lead to irritability, restlessness, poor engagement in treatment, and discharges against medical advice. The Tobacco Treatment Team is not always able to meet with a patient in the first 24 hours of admission, so primary care team members must be responsible for prescribing NRT.

Problem/Impact Statement:
Smoking is the leading cause of preventable death in the US. To be truly patient-centered, we must encourage our patients to lead the healthiest lives possible and to reduce their chance of preventable disease and death. Offering Nicotine Replacement Therapy (NRT) in hospitals improves the likelihood that a patient will quit. Prescribing NRT within 24 hours of admission to the hospital also decreases the incidence of nicotine withdrawal, which, when left untreated, can lead to irritability, restlessness, poor engagement in treatment, and discharges against medical advice. The Tobacco Treatment Team is not always able to meet with a patient in the first 24 hours of admission, so primary care team members must be responsible for prescribing NRT.

Scope:
In Scope: Admitted patients positive for nicotine use
Out of Scope: Any other substance abuse

Goal/Objective:
Goal: 100% of the time, Nicotine Replacement Therapies (NRT) will be ordered within 24 hours after admission to prevent nicotine withdrawal

Baseline Metrics/Current State:

<table>
<thead>
<tr>
<th>Series</th>
<th>Apr-18</th>
<th>May-18</th>
<th>Jun-18</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>74%</td>
<td>79%</td>
<td>74%</td>
</tr>
</tbody>
</table>

Root Cause Analysis:

Countermeasures

<table>
<thead>
<tr>
<th>Action</th>
<th>Owner</th>
<th>Completion Date</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collect baseline data using a daily KPI: 100% of the time, patients seen for a Tobacco Consult will have NRT ordered on Admission</td>
<td>Entire Team</td>
<td>6/1/2018</td>
<td>Complete</td>
</tr>
<tr>
<td>Meet with Nursing Practice Counsel to request and inform of need for a change in the institutional policy for Tobacco Screening</td>
<td>Donna Chamoff, Cheryl Pawloski</td>
<td>5/8/2018</td>
<td>Complete</td>
</tr>
<tr>
<td>Draft updated institutional policy for Tobacco Screening and Counseling that directs RN’s to contact their team providers within 24 hrs. to get</td>
<td>Donna Chamoff, Cheryl Pawloski</td>
<td>5/23/2018</td>
<td>Complete</td>
</tr>
<tr>
<td>Approval for updated policy by Wendy Osgood, VP Adult Medicine Service Line and Julia Dubbin, Director of Accreditation and Regulation</td>
<td>Donna Chamoff, Cheryl Pawloski</td>
<td>8/8/2018</td>
<td>Complete</td>
</tr>
<tr>
<td>Educate staff on policy change - Both on units and as a yearly competency</td>
<td>Donna Chamoff, Cheryl Pawloski</td>
<td>10/1/2018</td>
<td>Complete</td>
</tr>
<tr>
<td>Pilot project started on R7 and R9</td>
<td>Cheryl Pawloski</td>
<td>3/1/2019</td>
<td>Complete</td>
</tr>
<tr>
<td>Daily KPI: 100% of the time R7 and R9 patients seen for Tobacco Consult will have NRT ordered on admission</td>
<td>Cheryl Pawloski, Holly Stewart</td>
<td>4/1/2019</td>
<td>Complete</td>
</tr>
<tr>
<td>NRT to be ordered at the same time as Tobacco Consult order. If created reminder box in EPIC when Tobacco Consult is ordered that alerts provider to also order NRT.</td>
<td>Cheryl Pawloski, Holly Stewart</td>
<td>3/1/2019</td>
<td>Complete</td>
</tr>
<tr>
<td>Daily KPI: 100% of the time, R7 and R9 providers will order NRT on admission based on best practice</td>
<td>Cheryl Pawloski, Holly Stewart</td>
<td>4/15/2019</td>
<td>Complete</td>
</tr>
<tr>
<td>Daily KPI: 100% of the time R7 and R9 Tobacco Consult patients will have NRT ordered for discharge</td>
<td>Cheryl Pawloski, Holly Stewart</td>
<td>4/15/2019</td>
<td>Complete</td>
</tr>
<tr>
<td>Forward Tobacco Consult to MMP Cardiology Providers through EPIC to ensure continuation of NRT</td>
<td>Cheryl Pawloski, Holly Stewart</td>
<td>4/15/2019</td>
<td>Complete</td>
</tr>
</tbody>
</table>

Next Steps
- Education on all units
- Tobacco Assessment added to yearly competency policy

Executive Sponsor: Wendy Osgood
Facilitator: Amy Sparks