Going Tobacco-Free in Behavioral Health Settings: Using a Logic Model

Chizimuzo Okoli, PhD, MPH, MSN RN, NCTTP
Associate Professor, University of Kentucky College of Nursing
Director of Tobacco Treatment Services, Eastern State Hospital
Director, Behavioral Health Wellness Environments for Living and Learning (BH WELL)

Learning Objective

To discuss the use of a logic model in guiding tobacco-free campus/setting development.

CDC Recommendations for behavioral health settings

✔ ❑Stopping practices that encourage tobacco use (such as not providing cigarettes to patients and not allowing staff to smoke with patients)

✔ ❑Making entire campus 100% tobacco-free

✔ ❑Including tobacco treatment as part of mental health treatment and wellness

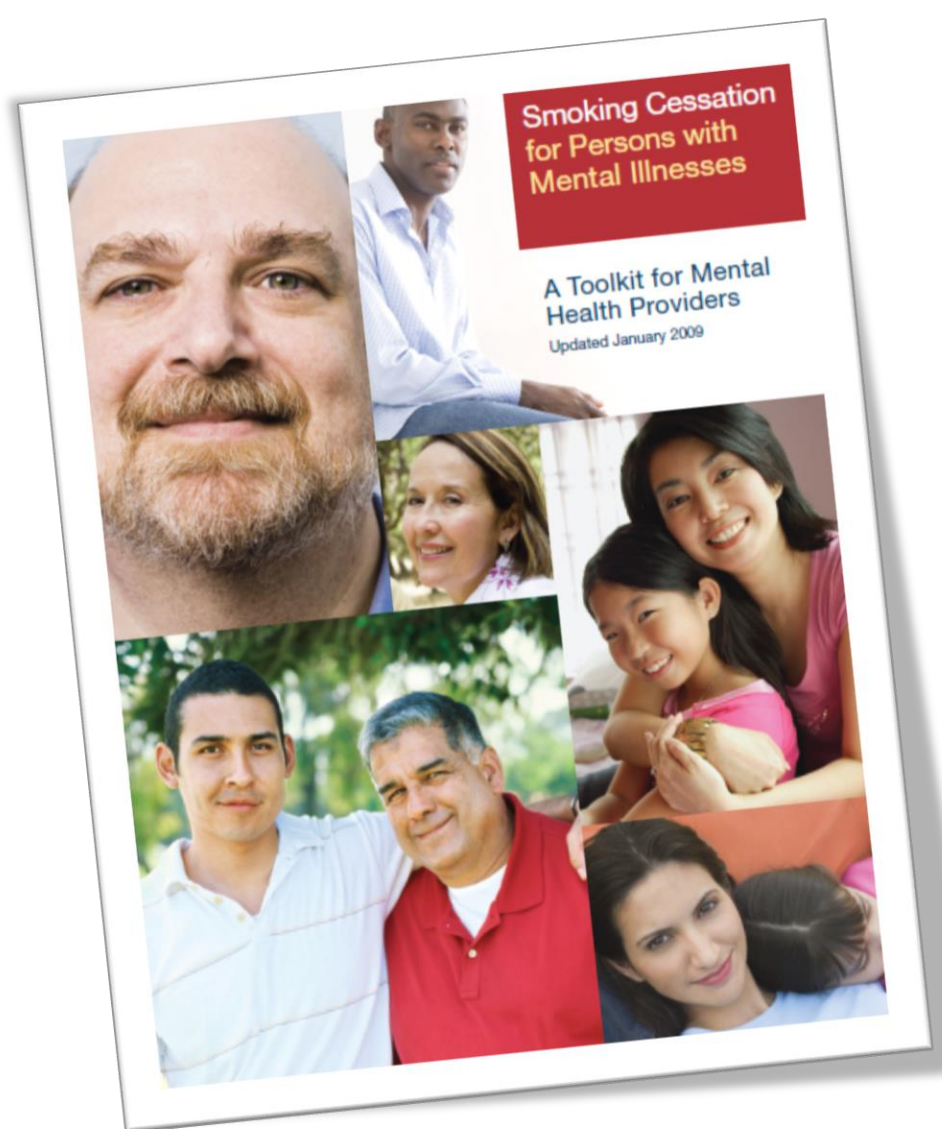http://www.cdc.gov/vitalsigns/pdf/2013-02-vitalsigns.pdf

Tobacco-Free Living in Psychiatric Settings

A best-practices toolkit promoting wellness and recovery

July 2007
(updated October 2010)

National Association of State Mental Health Program Directors
66 Canal Center Plaza, Suite 302
Alexandria, Virginia 22314
Tel (703) 739-9333
Fax (703) 548-9517
www.nasmhpd.org

Smoking Cessation for Persons with Mental Illnesses

A Toolkit for Mental Health Providers
Updated January 2009

https://www.samhsa.gov/sites/default/files/.../tobacco-free-psychiatric-settings.pdf
https://www.integration.samhsa.gov/Smoking_Cessation_for_Persons_with_MI.pdf

Going Tobacco Free: Overview

Planning:

◦ Situation

◦ Priorities

◦ INPUTS (RESOURCES)

◦ OUTPUTS (ACTIVITIES & PARTICIPANTS)

Evaluation

◦ RE-AIM Framework

◦ OUTCOMES

  ◦ Process Evaluation

  ◦ Outcome Evaluation

Implementation:

◦ Communication to staff and members

◦ Survey/Forms development

◦ Pre-implementation (baseline) Assessments

◦ Beginning of intervention

◦ Post implementation assessments

Logic Model for Implementation and Evaluation
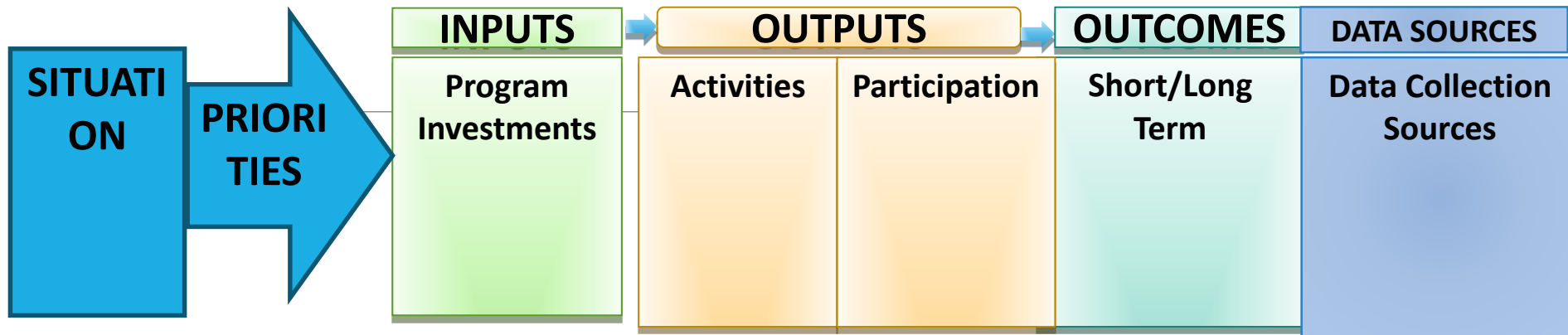
Situation

Statement defining the need/purpose of your initiative.

For example "Need to provide a healthy environment to achieve wellness and recovery goals by de-normalizing tobacco use and promoting tobacco cessation"

Priorities

1) Implement Process
   a) Create Timeline
   b) Identify/develop data sources for monitoring outcomes
   c) Educate staff & members

2) Evaluate Process
   a) Process
   b) Outcome
   c) Impact

INPUTS (RESOURCES)

Components	Description
Partnerships	Senior Administrative Team, community partnerships e.tc.
Management	Internal Team
Data collection Personnel	IT, other staff
Funding	Grant or Internal funds
Databases	Electronic Medical Records, survey instruments
Data/Financial analysts	Identify Personnel
Posters/Signs	Obtain from Local Health Department, American Lung Association

Outputs
(ACTIVITIES/PARTICIPATION)

1) Implement Process
a) Develop project timeline
b) Develop forms/Identify data sources for tracking outcomes
c) Present tobacco free campus messages all staff and members

2) Evaluate Process
a) <u>Process</u>: Determine Reach, Dose, Fidelity (Adherence)
b) <u>Outcome</u>: Short term (6-month) clinical, patient, program, & financial outcomes
c) <u>Impact</u>: Long term (1-year) clinical, patient, program, & financial outcomes

Sample Timeline

ITEMS	INITIATION	COMPLETION
Communication to staff and members (This could include incentive based contests!!)	Sept 2019	Dec 2019
Forms/Survey development	Sept 2019	Jun 2020
Pre implementation (Baseline) Assessments	Jul 2020	Dec 2020
Beginning of intervention	Jan 2021	--
Post-implementation assessments	Jul 2021	Dec 2021

Evaluation Framework: RE-AIM Model

Components	Description
Reach	Absolute number, proportion, and representativeness of participants
Effectiveness	The impact of the initiative/program on outcomes (including clinical, patient, program, and financial)
Adoption	Absolute number, proportion, and representativeness of settings or agents that are involved in the initiative
Implementation	Adherence or fidelity to the components or protocol of the initiative
Maintenance	Degree to which the initiative is institutionalized as part of routine practice Long term effect of the program beyond 6 months

Glasgow et al. Evaluating the public health impact of health promotion interventions: the RE-AIM framework. Am J Public Health. 1999;89(9):1322---1327.
Gaglio et al. (2013). The RE-AIM framework: a systematic review of use over time. Am J Public Health, 103(6), e38-e46.

PROCESS/IMPLEMENTATION EVALUATION

Variable	Definition	Time Period	Data Source	Analysis
Reach	Number of staff & members to whom the intervention was delivered	6 months before/6- months after implementation	EMR HR records Surveys	-Frequencies (%)
Dose	Number of times digital signs shown, & number and types of posters put up	During implementation	-Tracking sheet	Counts
Fidelity	Adherence to the tobacco free initiative components (signage, education, providing smoking cessation)	After implementation	- A checklist of all initiative components	Yes vs. no

CLINICAL OUTCOME EVALUATION (EXAMPLES)

Variable	Definition	Time Period	Data Source	Analysis
Psych medication type and dose	Change in type and dose of psych medications provided to members	6-mnths pre and 6-mnths post	-EMR	- chi-square analysis (type) -Independent sample t-tests (dosage)
O2 levels	- Change in O2 levels of members	6-mnths pre and 6-mnths post	-EMR	-Independent sample t-tests (change in level)
Blood pressure	-Change in blood pressure of members	6-mnths pre and 6-mnths post	-EMR	-Independent sample t-tests (change in level)
Nicotine Replacement Therapy use	-Change in use of Nicotine Replacement Therapy by members	6-mnths pre and 6-mnths post	-EMR	-Independent sample t-tests (change in total number of prescriptions)

PATIENT & STAFF OUTCOMES EVALUATION (Examples)

Variable	Definition	Time Period	Data Source	Analysis
Tobacco cessation/ reduction	-Change in tobacco use and amount used by members	6-mnths pre and 6-mnths post implementation	-EMR -Surveys	-Chi-square analysis (tobacco use status) -Independent sample t-tests (amounts)
Opinion and satisfaction with tobacco free initiative	-Change in opinion & satisfaction with initiative	6-mnths pre and 6-mnths post implementation	-Survey	-Chi-square or independent sample t-tests (based on measurement)

PROGRAM OUTCOME EVALUATION (EXAMPLE)

Variable	Definition	Time Period	Data Source	Analysis
Attendance & Program Utilization	Attendance at programs and utilization of programs	6-mnths pre/post	EMR	Independent sample t-tests (meant attendance)
Butt counts	-Butts on property	6-mnths pre/post	-Data collection tool	-Independent sample t-tests
Perceived initiative adherence	-Staff and member perceived initiative adherence	6-mnths post	-Survey	- Frequencies (%)

QUESTIONS?