New York State Cessation Center Collaborative Statewide Conference Call

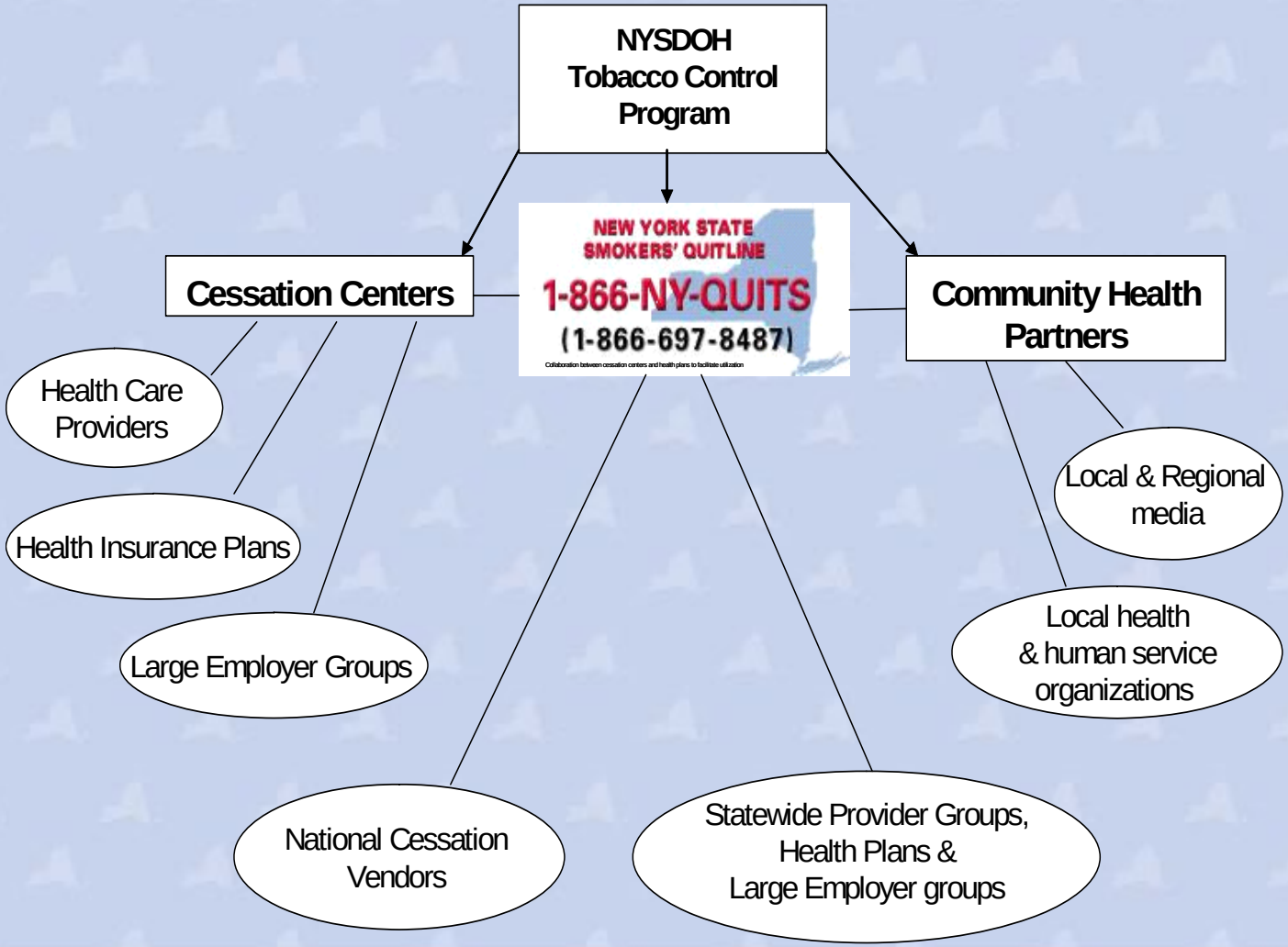
"How the NYS Smokers' Quitline Can Help Your Facility Become Tobacco Free "

March 1, 2006

Presentation Outline

- Quitline Overview and Benefits
- Quitline Success
- Strategies for Building a Tobacco Free Facility
- Keys to Remember

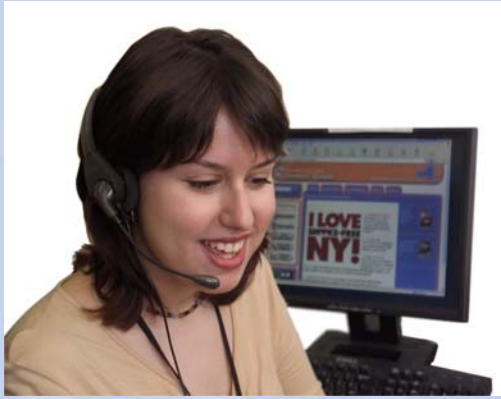
Central Role of the Quitline in New York State's Tobacco Cessation Plans



What is the New York State Smokers' Quitline?

The New York State Smokers' Quitline is a free and confidential program that provides evidence-based stop smoking services to New York State residents who want to stop smoking or using other forms of tobacco.

Quitline Overview



In operation since 2000

Based at Roswell Park Cancer Institute, located in Buffalo

Serviced more than 378,000 calls

Hours of Operation:

Live Specialist Support
Monday – Friday 9 a.m.-9 p.m.
Saturday – Sunday 9 a.m. - 1 p.m.

Taped Message Library: **24 hours/7days**

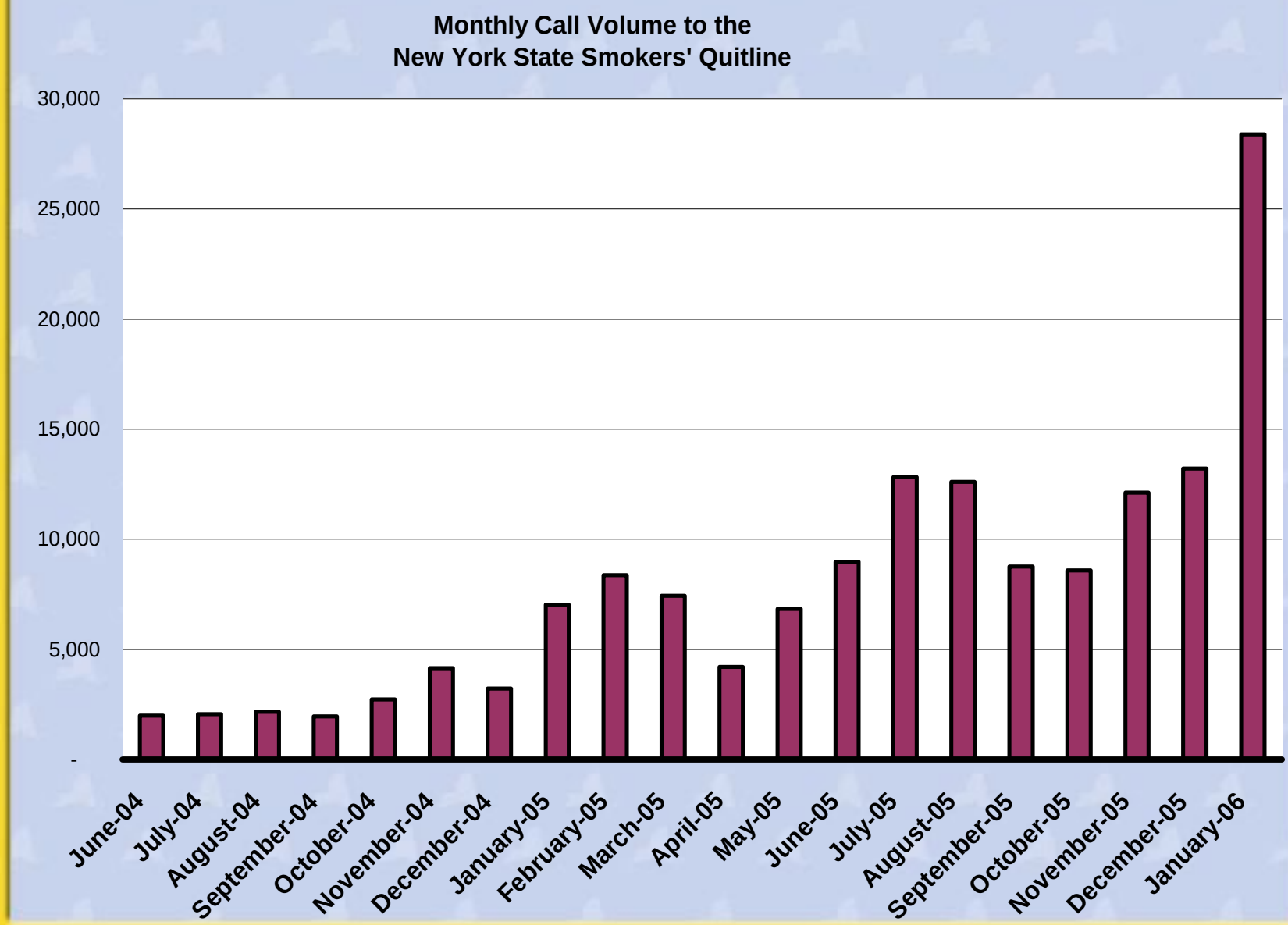
Tip of the Day: **24 hours/7days**

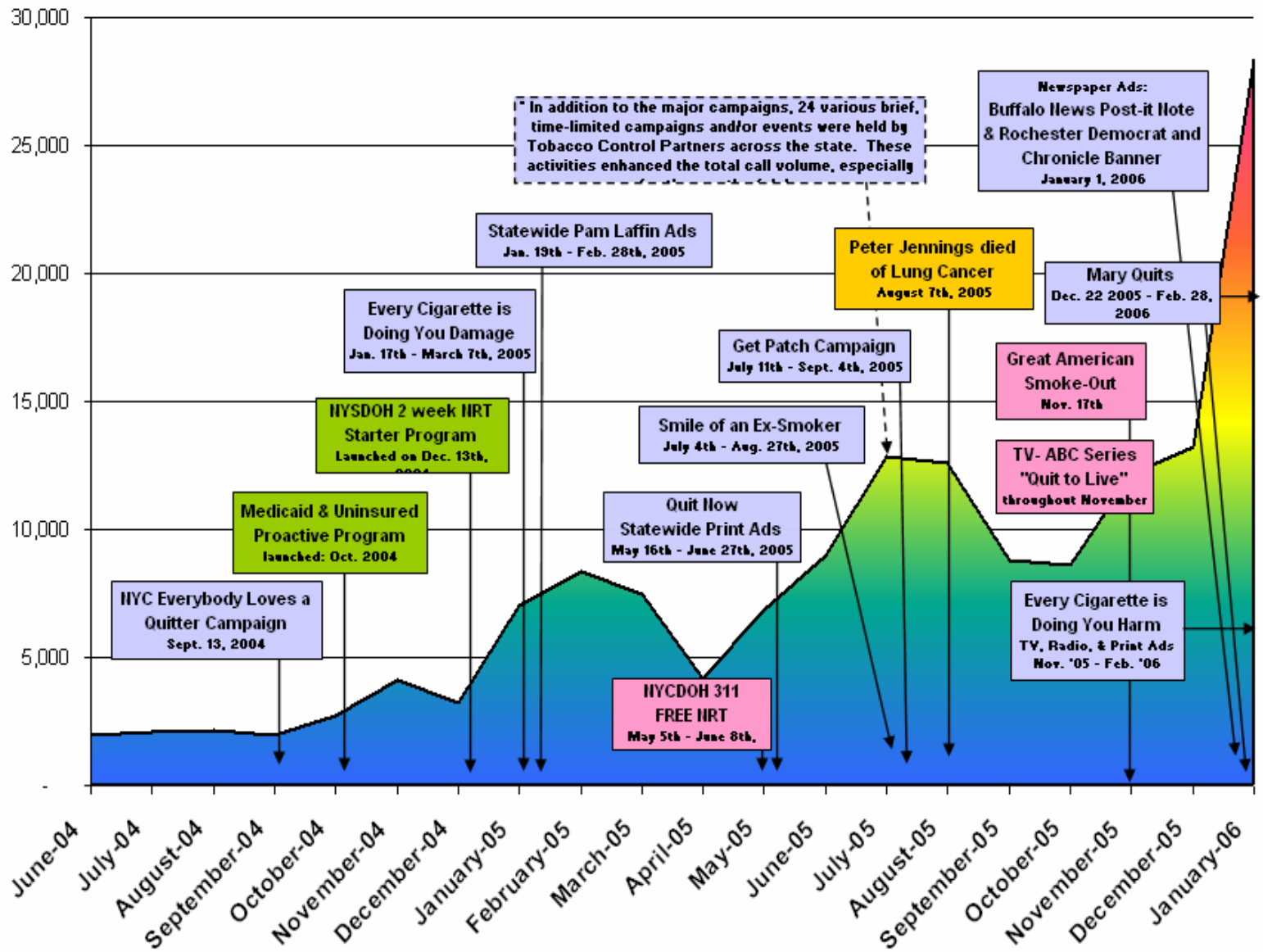
The Quitline Provides…

- Free and confidential services
- Free NRT starter kit for eligible callers
- Resources for all health care settings
- Evidenced-based services
- Referrals to local community supports
- Direct collaboration with local Tobacco Control Partners
- Information on NYS Health Plans' cessation coverage

January 2006

Starts off in Record Fashion!


Monthly Call Volume to the
New York State Smokers' Quitline
30,000
25,000
20,000
15,000
10,000
5,000
-
June-04
July-04
August-04
September-04
October-04
November-04
December-04
January-05
February-05
March-05
April-05
May-05
June-05
July-05
August-05
September-05
October-05
November-05
December-05
January-06


30,000
25,000
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June-04
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January-05
February-05
March-05
April-05
May-05
June-05
July-05
August-05
September-05
October-05
November-05
December-05
January-06
NYC Everybody Loves a Quitter Campaign
Sept. 13, 2004
Medicaid & Uninsured Proactive Program
launched: Oct. 2004
NYSDOH 2 week NRT Starter Program
Launched on Dec. 13th,
Every Cigarette is Doing You Damage
Jan. 17th - March 7th, 2005
Statewide Pam Laffin Ads
Jan. 19th - Feb. 28th, 2005
In addition to the major campaigns, 24 various brief, time-limited campaigns and/or events were held by Tobacco Control Partners across the state. These activities enhanced the total call volume, especially
Quit Now Statewide Print Ads
May 16th - June 27th, 2005
NYCDOH 311 FREE NRT
May 5th - June 8th,
Smile of an Ex-Smoker
July 4th - Aug. 27th, 2005
Get Patch Campaign
July 11th - Sept. 4th, 2005
Peter Jennings died of Lung Cancer
August 7th, 2005
Newspaper Ads:
Buffalo News Post-it Note & Rochester Democrat and Chronicle Banner
January 1, 2006
Mary Quits
Dec. 22 2005 - Feb. 28, 2006
Great American Smoke-Out
Nov. 17th
TV- ABC Series "Quit to Live"
throughout November
Every Cigarette is Doing You Harm
TV, Radio, & Print Ads
Nov. '05 - Feb. '06

How Can the New York State Smokers' Quitline Assist Your Facility to Become Tobacco Free?

Fax-to-Quit
Provider Referral Program

- Easy fax referral program for providers to refer tobacco using patients
- Referral form is faxed to Quitline
- Quitline Specialist calls patient and provides stop smoking intervention
- Feedback form is faxed back to provider office

Fax-to-Quit

Fax Referral Form

Patient stamp, label OR Name, record number, DOB, date:

Fax form to: 1-866-QUIT-FAX (1-866-784-8329)

TOBACCO TREATMENT CHECKLIST

[ ] **ADVISE** smoker to stop smoking. Recommended stop-smoking advice: ***"I strongly advise you to quit smoking and can help you."***

[ ] **ASSESS** readiness to quit: [ ] Ready to quit [ ] Thinking about quitting [ ] Not ready to quit

[ ] **ASSIST** smoker to quit: [ ] Brief counseling [ ] Prescription medications if appropriate:

Nicotine Replacement (CIRCLE): patch gum lozenge inhaler nasal spray

Other (CIRCLE): bupropion (Zyban® or Wellbutrin SR®)

[ ] **ARRANGE** follow-up: [ ] Refer to NYS Smokers' Quitline by faxing this page (toll-free) to **1-866-784-8329**

REFERRAL SOURCE

Referred by:

Name (Please print) _____

Group/Agency/Hospital/Organization _____

Street Address/City/State/Zip Code _____

Phone (area code + number) ( ) _____ - _____

Fax (area code + number) ( ) _____ - _____

DO NOT CALL PATIENT UNTIL AFTER (mm/dd/yy): _____/_____/_____

Send progress report to (If different from above):

Name (Please print) _____

Group/Agency/Hospital/Organization _____

Street Address/City/State/Zip Code _____

Phone (area code + number) ( ) _____ - _____

Fax (area code + number) ( ) _____ - _____

PATIENT INFORMATION

Patient's name (Please print)

First: _____ Last: _____

Date of Birth (mm/dd/yy): _____/_____/_____

Phone number (including area code): ( ) _____ - _____ **May we leave a message?** [ ] Yes [ ] No

Best time to call: [ ] **Morning** (9 am to noon) [ ] **Afternoon** (Noon to 5 pm) [ ] **Evening** (5 pm to 9 pm)

Language: [ ] English [ ] Spanish

Other: _____

Street Address: _____

City: _____ **Zip Code:** _____

Health Insurance? [ ] Yes [ ] No

E-mail: _____

@ _____.com

Insurance carrier: _____

If Medicaid, ID Number: _____

PERMISSION

I (undersigned) give permission for the support staff of the New York State Smokers' Quitline to contact me, coach me in quitting smoking, and give feedback regarding my progress to the health care provider listed above and permission for that provider to forward the information to other relevant health care providers.

_____ ____/____/____

Signature of Patient (or Agent if authorization was verbal). Signature is required for patient to be called. **Date**

ReferFormRV3-24-04.doc

New York State Smokers' Quitline 1-(866)-NY-QUITS(1-866-697-8487)

Fax-to-Quit

Patient Progress

Patient stamp, label or name, record number, DOB, date:

Patient Information

Patient's Name: **Referrer:**

Date of Birth: **Phone Number:**

Patient Contact Attempts

Date	By	Call Type	Result	Assessment

Call Outcomes

Comments

Quit Commitment

- [ ] Your patient wants to quit.
- [ ] Your patient has chosen a quit date:
- [ ] Your patient has not determined a quit date but plans a quit attempt within two weeks.

NRT Eligibility

- [ ] Eligible: Your patient was sent a 2-week supply of:
- [ ] Your patient was ineligible for a 2-week supply of NRT.
  Reason:
- [ ] Your patient has already received NRT and is using NRT.
- [ ] Your patient is not using NRT yet.
- [ ] Your patient has discontinued use of NRT. Reason:

Referrals

Benefits of Fax-to-Quit

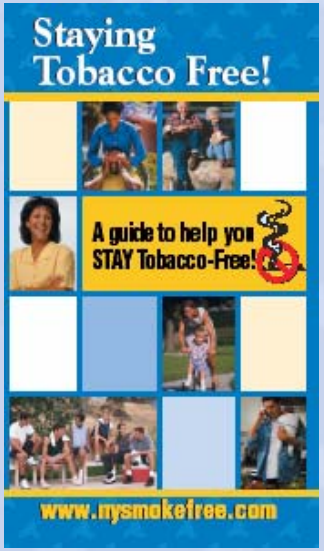
- Moves clinical systems from asking and advising smokers to quit to more actively assessing and assisting them in a quit attempt
- Responds to the unique needs of smokers who benefit from a proactive approach
- Fills a need for physicians, other clinicians, and health care delivery systems seeking ways to assist their clients in being successful with their quit attempts

Quitline Materials

- Material Order form available on Quitline Website www.nysmokefree.com
- Materials can be ordered by calling the Quitline directly
- Material quantity limits are listed on the form
- Bulk orders provided based on availability

Samples of Quitline Material

Adult Self-help Guide



Former Smoker Self-help Guide

Youth Self-help Guide

Quitline Educational Video

Now Available

The video describes the array of Quitline services and features testimonials from former smokers, providers, and Quitline Specialists.

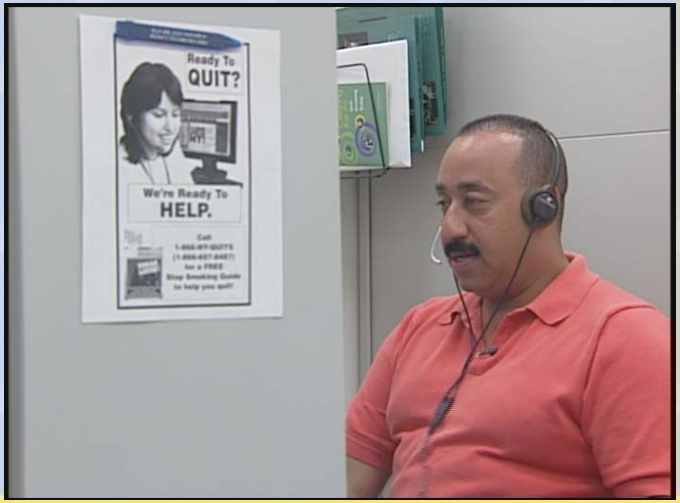
The video comes in two versions, one for the smoking audience and one for health care professionals. Orders can be placed starting March 8, 2006.

The Quitline video is perfect for:

•patient waiting areas

•clinics

•professional presentations



Key Points to Remember

☏ The Quitline is a resource for all New York State Residents.

☏ The Quitline can help finish your 5 A's.

☏ In conjunction with local Tobacco Control Partners, the Quitline can provide technical assistance to you and your facilities.

☏ When in doubt, call to find out!

Thank You!