Quality Improvement Project on Improving Referrals of Inpatient Smokers with Cardiovascular Disease to the Smoking Cessation Team

Pratiksha Srinivas, Lai Lai Wyut Yee, Cheng Ken Ong Blackpool Teaching Hospital NHS Foundation Trust



INTRODUCTION

Smoking is a leading cause of cardiovascular diseases. This quality improvement project was carried out in the Cardiology department with an aim to improve appropriate referrals of inpatient smokers to smoke free team. Successful interventions begin with identifying users and carrying out appropriate interventions based on the patient's willingness to quit. The five interventions are the "5 A's": Ask, Advise, Assess, Assist, and Arrange.

*Ask: Identify and document tobacco use status for patient at every visit.

Advise Encourage tobacco users to quit smoking.

Assess: Is the tobacco user willing to make a quit attempt currently?Assist: Use counselling and pharmacotherapy to patients quit smoking.

Arrange: Schedule follow-up contact after the quit date.

BACKGROUND

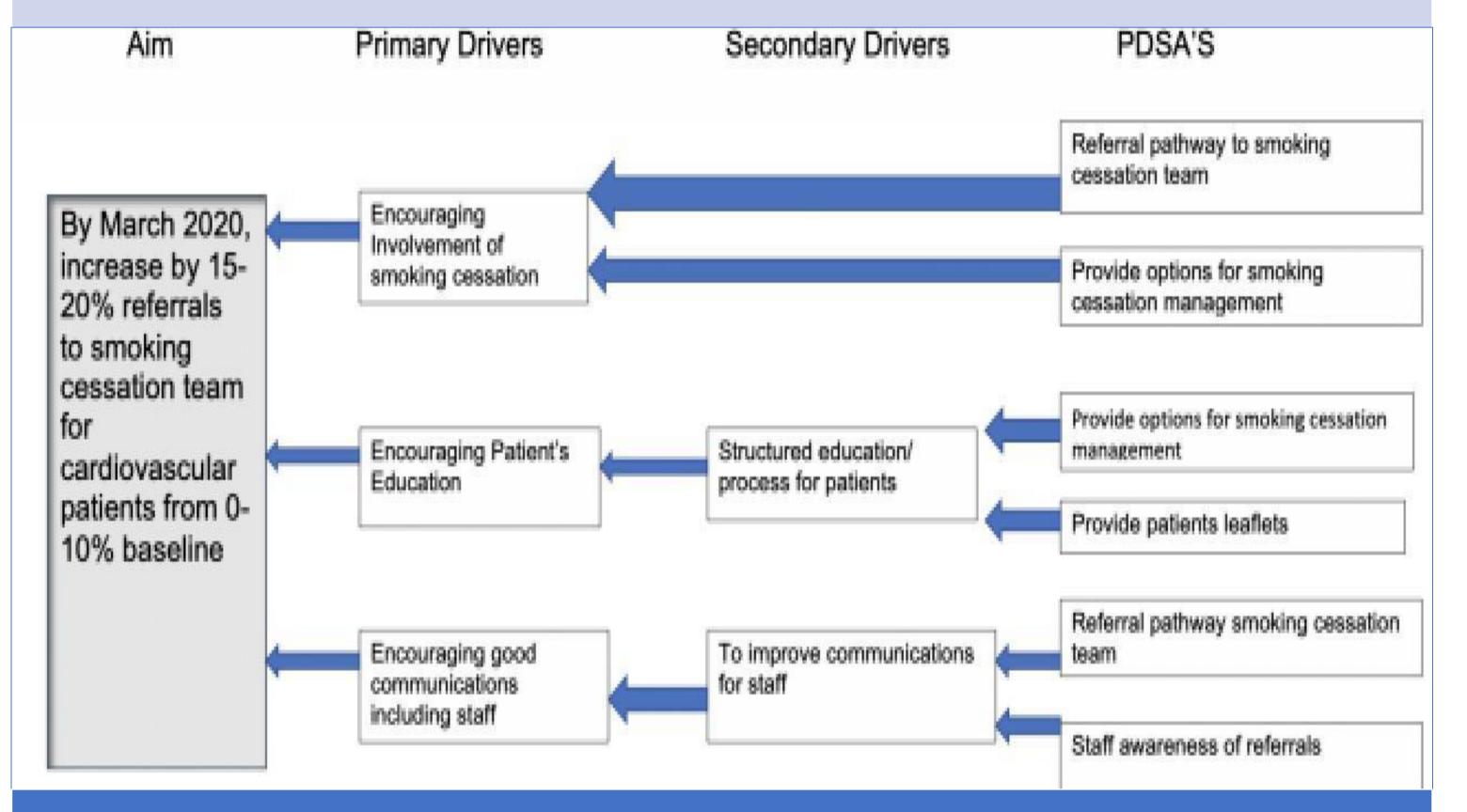
There are 8000 smoking related deaths in England among which 400 are in Blackpool alone. Every year there are 2835 smoking related hospital admissions.

The annual cost to Blackpool's health service associated with smoking related illnesses are estimated to exceed 7 million each year with an additional £744,000 spent on treatment as a result of passive smoking. Blackpool tops for having the highest number of smokers and smoking related diseases in the whole of England.

Although Blackpool Council has a smoking free team in the community, the lack of having a smoking cessation team solely in the hospital led us to embark on this project, starting within the Cardiology department.

OBJECTIVES

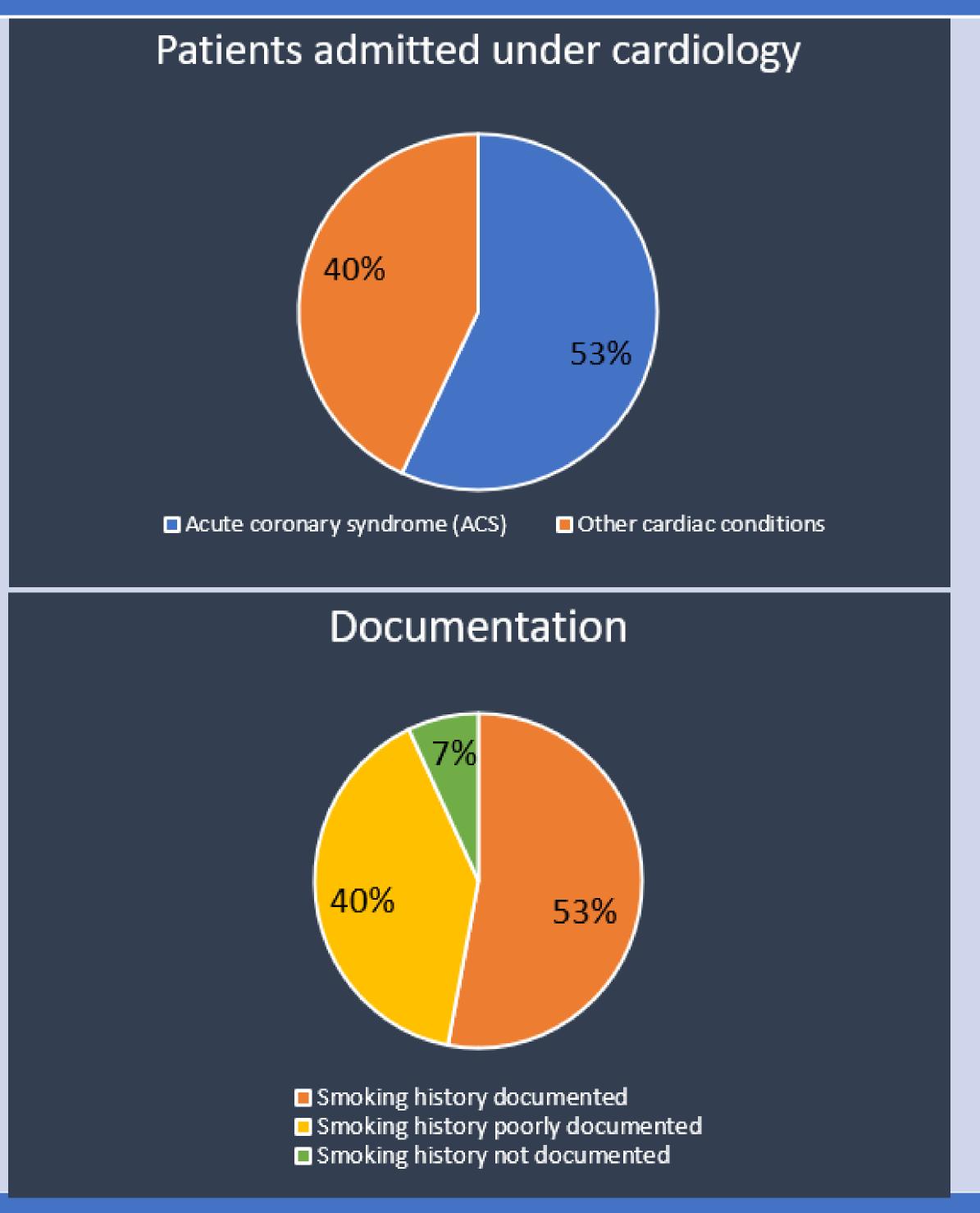
- ❖ To reduce length of hospital stay.
- Primary prevention of smoking related diseases and its association.
- To reduce mortality and improve quality of life in patients undergoing cardiovascular procedures
- ❖ To reduce costs to the NHS, with patients who continue to smoke being readmitted with more smoking related illnesses in the future.



METHODS

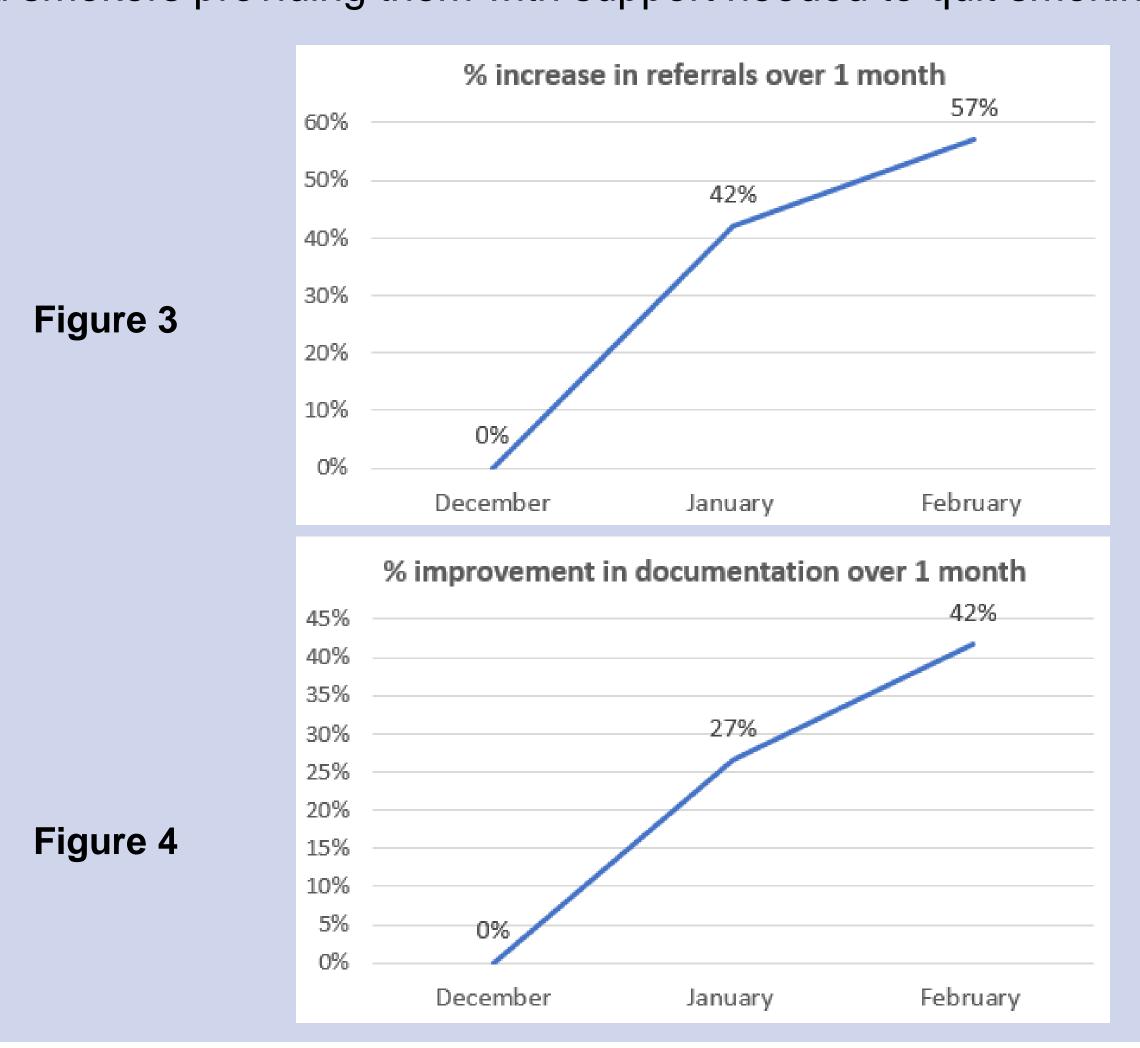
Data collected for 60 patients with cardiovascular disease over a period of one month showed 75% of patients admitted under cardiology were either acute coronary syndrome (ACS) or ischemic heart disease (IHD) (Fig1). Amongst them, 85% were confirmed smokers. Due to poor documentation, nearly 94% of the patients were not referred to the smoking free team on admission which led to a lack of providing advice to aid cessation of smoking and future follow up for patients who agreed to a long-term quitting plan (Fig2). 90% of the patients that were referred and seen by the smoke free team wanted some kinds of support during their hospital admission and in the community.

FIGURES 1 & 2



RESULTS

Post education and encouragement to health care professionals working in cardiology wards, we were able to achieve a drastic increase in the referrals sent to the smoke free team thus increasing an initial number of patient seen from 42% to 57% (Fig3). This included the quality of documentation by doctors and nursing staff which saw an increase in the smokers highlighted to the smoke free team to from 27% to 42% (Fig 4) thus increasing identification of said smokers providing them with support needed to guit smoking.



CONCLUSION

- ❖ Education is a useful intervention in raising awareness among healthcare professionals. This intervention can be carried out in various forms including the quality of documentation of smokers, providing of structured education for patients, encouraging involvement of the smoking cessation team and staff awareness of referral.
- ❖ Our aim was thus achieved. We are also aiming to nominate a ward champion to take responsibility in checking the patient notes and highlighting identified smokers to health professionals thereby increasing the referrals sent to the smoke free team.
- ❖ Given the success of increased referrals from the cardiology department over one month, it provided good evidence and a good opportunity for the trust to form its own smoking team dedicated to patients admitted to the Blackpool Trust. Having a smoking cessation team in the hospital not only helps our patients but also a great employment opportunity and the ability to be part of an excellent team.