

TARGETS – KEEPING THE MOMENTUM GOING

Lakes DHB staff are absolutely elated with their health target results, achieving 100% for Q4, and there is a real feeling of pride which was especially evident after the Minister made a special mention of the results, during his visit in late July to open the new Rotorua Hospital building. This reinforced the reason behind why they do this and all the hard work that went into achieving these results.

The success of their target was down to the project plan they implemented, which they will continue following in the coming year. The approaches and resources that were part of this plan included:

- 1) realising what they'd been doing previously wasn't working so they needed to refocus the programme. They stressed a personal rather than public health approach which fits better with the attitudes and philosophy of clinical staff
- 2) The smokefree project team members engaged with the staff, especially clinicians, on a one-to-one basis and are working with them and not on them
- 3) Training for clinical staff is mandatory and is now part of new staff induction process, which is also backed up by having good databases that identify training gaps
- 4) Detailed data analysis, reporting, auditing and monitoring – provides information about smoking prevalence, health target performance results as well as constant monitoring, tracking and feedback on each ward which keeps staff, the Board and the Executive team well informed
- 5) Detailed smokefree communications including Lakes DHB SF branding (orange and black colours) which is highly visible. There are multi faceted resources which were designed to change the organisation's culture and knowledge around smokefree.

Lakes smokefree communication with their staff is a strong point; health target results are reported on a monthly basis to staff (both hard copy and electronically), discharge summary reports are sent to doctors, regular intranet messages are provided and the presence of orange and black branding constantly reminds staff to ABC their patients.

The focus for the coming year will be more on the C part of the briefing and this will help create a new focus to keep staff on top of the game. Lakes DHB is doing fabulously at the A and B part and now the smokefree team wants to move its attention to the C part of the equation. They will make sure patients are given NRT and will support this with posters around the hospitals, training doctors, and continuing to make sure SF staff are highly visible and available on the wards for any queries that staff might have about NRT. Email updates will be sent out for any queries that may have been raised and they are encouraged by the fact that staff are now discussing issues amongst themselves.

To ensure continued success of the health target, Lakes smokefree staff are viewing their work as 'business as usual'. They will continue to feed messages to their staff that the ABC approach is a routine part of their job, along with keeping a visible profile around the wards. When the plan was initially put into place there was a strong focus on having talks at various meetings, in-service and at changeovers to get the message out there. This approach has dropped off with the success of the target but will be brought back in to communicate the slight change in focus on **cessation** support and strategy.

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The team at Capital & Coast DHB made enormous progress last year with their electronic discharge summary process. The new process captured every identified smoker that passed through the hospital – any smokers who were not recording as receiving brief advice were then sent a discharge letter with advice to quit, thus ensuring no one could pass through the DHB as a smoker without being offered advice and support to quit in one form or another.

The team also analyse the data in weekly reports to different departments and identify how much of the brief advice is being given by which wards and how many times a discharge letter is being used as a backstop.

Capital & Coast put this approach in place in April 2011 when they were sitting on about 63-65% with the target. A month later in May their results shot up towards the 90s and by the end of June they were sitting on 96%.

Looking ahead towards achieving the increased target, Maurice and the team will keep these approaches going. They have also been meeting with the Smokefree teams from the other DHBs in the region and comparing notes and ideas.

As well as increased use of mechanisms like the discharge letters they are also looking at ways to make NRT more easily accessible for nurses to deliver to patients – partly by increasing the number of Quit Card providers onsite and also by increasing the awareness about what Quit Card providers can actually do.

Maurice also told us they found the one page fact-sheets that provided key messages for different areas extremely useful and used those widely. Maurice observed that it would be helpful to have a portal available that made general population health information available in one place for people to use in their wards and communities.

The team are confident that the drive towards better help for smokers to quit will stay high on the agenda – it's now part of the key performance indicators with their directorate management – but they're continuing to think about how they can continue to up the ante.

Northland DHB are delighted that staff have engaged so well with monitoring patients' smokefree status and supporting patients with their addiction.

The ABC system is well on the way to becoming standard practice across all NDHB hospitals and this is critical in an area with such a high smoking prevalence among its people.

To keep momentum going, they are emphasising to staff the meaningful outcomes that ABC can have. Spending just 5-10 mins with a patient each day and providing them with ABC, over a year, it is likely that 6 patients will quit and they will have saved 3 lives. Last year Northland DHB provided ABC to over 5000 patients, so at a very conservative estimate, knowing that even with a brief intervention, 1 in 40 patients will quit, this means 125 patients will have quit and about half of them - over 60 patients - will have saved their lives by quitting.

Additionally, they are compiling evidence of success stories of people who were ABC'd by their staff who went on to have successful quit attempt/s - in some cases encouraging their whanau and friends to become smokefree too. They intend to share and promote these stories so staff realise the value of what they're doing with ABC. They are also looking at

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service areas that are particularly successful in implementing ABC and seeing what methods could be utilised in other areas.

The approaches and resources that were most helpful last year and will continue to be used in the coming year included getting their Smokefree Champions well trained and motivated by clarifying their role and developing useful information and 'training' resources to support them. They are also hoping for some new Champions in areas that need it.

The Smokefree Hospitals team have been visible and pro-active in service areas, offering help particularly where the actual work around ABC was (wrongly) perceived to be onerous. Having support from the top, including the CEO and the Steering Group was also critical in getting consistent buy-in to ABC and the tobacco target from Clinicians, Managers, Educators etc. Northland DHB expect that support to continue in the coming year so they can remain in a strong position to meet the target of 95%.

They anticipate encountering periods of 'ABC fatigue', particularly when the hospitals are full and staff are very busy with other new initiatives and demands on their time. The SF Hospitals team expect to keep this on everyone's radar and will work hard around this - as they have seen the ABC stats can go down as well as up! They will look to share success stories and promote these by various means, with high impact displays on staff notice boards and publications in Prescribe and Weekender. They will also continue to provide regular updates for Managers; including monthly ABC progress graphs for quality notice boards, and continuing to listen to difficulties that staff are having in certain areas and considering solutions.

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