



TOBACCO: RECOVERY ACROSS THE CONTINUUM

a stage-based motivational model

TRAC Getting- Started Guide



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Organization Name: _____ Date: _____

**Tobacco: Recovery Across the Continuum (TRAC) Implementation
Early Stage Considerations and Next Steps**

Getting Started

I Organization Wide Effort

The Ohio Tobacco: Recovery Across the Continuum (TRAC) model is designed to assist every consumer progress through all of the stages of change. Thus, an approach to helping the consumer is provided by staff throughout the organization, regardless of their role or function. Engagement of consumers early on in their contact with the organization will be necessary to address the consumer at all stages of readiness. In addition, significant involvement of medical professionals is needed. Developing and upholding an organizational policy for a tobacco-free workplace will also play an important role in helping people who use tobacco maintain health and wellness practices. Support will be provided for organization staff to help them model healthy behaviors and uphold the philosophy of a tobacco free workplace

Considerations and next steps:

- 1. Identify the organizational work teams or managers involved in tobacco policy development.**
- 2. Review current policy for existence, comprehensiveness, and enforcement.**
- 3. Develop senior management consensus regarding tobacco policy.**

Implementation planning notes:

- 1. What next steps are necessary to accomplish this task in our organization?**
- 2. Who will be responsible to ensure these steps are taken?**
- 3. What is the time frame for completion of this task?**

II Integrated Approach

Tobacco use has a significant impact on all areas of one's life. Providing education and information about the consequences of tobacco use and its effects are integrated with individual and group interactions with: mental condition, substance use, and physical health conditions; positive and challenging social implications of use; finances; housing; employment; identity; and independent functioning

Considerations and next steps:

1. **Convene medical professionals and clinical supervisors to determine where tobacco fits in current service array.**
 - **Identify the services/programs currently offered that integrate substance use and/or mental health with other service domains.**
 - **Determine where tobacco can be incorporated into treatment content. (e.g., is the impact of tobacco use discussed presently in education and treatment groups?)**

Implementation planning notes:

1. **What next steps are necessary to accomplish this task in our organization?**

2. **Who will be responsible to ensure these steps are taken?**

3. **What is the time frame for completion of this task?**

III Ongoing Assessment

Assessment incorporates understanding of tobacco use in context of the whole person. Identifying consumer tobacco use involves effective, standardized screening tools at the time of initial assessment, treatment plan reviews, and during regular treatment sessions. Assessment takes into account the extent of tobacco use, stage of readiness to change behavior, and its impact on other life areas. Assessment of a consumer's readiness to address the issue of tobacco use occurs frequently enough to capture readiness throughout all stages of change.

Considerations and next steps:

- 1. Make plans to begin fully assessing and diagnosing Tobacco Dependence.**
- 2. Review the current follow-up procedure after Tobacco Dependence is identified.**
 - a. What kinds of questions are you asking clients about tobacco?**
 - i. Identify who asks the questions and what happens to the answers (e.g. documented and not acted upon versus trigger for deeper assessment or referral).**
 - b. Are clients asked whether or not they have a desire to quit or cut down use? If yes, what kind of follow up do they receive?**
 - c. If so, how often are these questions revisited?**
 - d. Reflect the desire to quit smoking in the ISP's of interested consumers**
 - e. Obtain the Addendum to the Health Assessment document available from the Center for Evidence Based Practices**

Implementation planning notes:

- 1. What next steps are necessary to accomplish this task in our organization?**

- 2. Who will be responsible to ensure these steps are taken?**

- 3. What is the time frame for completion of this task?**

IV Stage-based Approach

All behavior change occurs in stages. Consequently, tobacco treatment interventions must be consistent with the consumer's stage of readiness to change (pre-contemplation, contemplation, preparation, action, and maintenance). The task is to match interventions to the consumer's stage of readiness to change with the goal of helping individuals move progressively through stages toward tobacco cessation. Relapse can be expected in the change process and is used as a learning opportunity rather than allowing it to be demoralizing. Inherent in a stage-based approach is a respect for consumer preferences and cultural differences.

Tobacco Interventions by Stage of Change	
Stage of Change	Intervention
Pre-contemplation	Assess use and readiness to change, brief motivational conversations, raise the issue, offer practical help, relationship building, utilize natural discussion opportunities related to personal goals
Contemplation	Develop motivation for change, understand consumer goals and tip ambivalence, provide structured health-based curriculum, ongoing assessment, peer support
Preparation	Deeper education about tobacco use, discuss alternatives to use; plans for change
Action	Tobacco-specific group and individual skills training, pharmacological management and relapse prevention planning; contingency management (abstinence recognition)
Maintenance	Ongoing skills training, social support, health and wellness focus, peer support, contingency management (abstinence recognition)
Relapse	Help consumer learn from relapse and recycle through the stages of contemplation, preparation, and action

Considerations and next steps:

1. Is a stage based approach used in addressing behavior change at your organization?
 - a. How does the TRAC Model fit in with what your organization is currently doing with stage-based treatment?
2. Are client interventions being offered in a stage appropriate manner?
3. Explore a whole organization approach to stage wise care
 - a. Explore how a stage-based approach fits current program and supervisory structure.
 - b. Develop competency based care expectations and professional development activities to support its implementation

Implementation planning notes:

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V Motivational Interventions

Motivational interventions are a key component to stage-based approaches. Motivational Interviewing (MI) is a collaborative person-centered, form of guiding to elicit and strengthen motivation for change. MI is a way of being with the consumer that is non-confrontational. It enables consumers to develop discrepancy between what they want in life and what keeps them from achieving their goals. Motivational interventions for tobacco use are utilized by all members of the formal support network (case manager, physician, nurse, peer counselor, staff counselor). Consumer preferences must drive the recovery process.

Considerations and next steps:

- 1. How are you currently integrating Motivational Interviewing into your services?**
 - a. What current organizational and supervisory structure exists to support this practice in service delivery?
 - b. Is MI supervised and used within your organization across all services or just within certain programs (i.e., IDDT)?
- 2. Identify next steps for developing competency for supervision and direct service using MI principles and strategies**

Implementation planning notes:

- 1. What next steps are necessary to accomplish this task in our organization?**

- 2. Who will be responsible to ensure these steps are taken?**

- 3. What is the time frame for completion of this task?**

VI Group and Individual Services

Information that fosters decisions for a healthier lifestyle can be provided through both group and individual contact: psychoeducation, skill building, coping techniques, and other strategies to quit tobacco use. In addition, groups offer an excellent setting for consumers to gain peer support in their efforts. Contingency Management (CM) strategies build extrinsic motivation until internal motivation can be developed. CM is a system of rewards to increase attendance or abstinence. Consumers who use tobacco products are treated on a time unlimited basis with intensity modified according to need and not based on arbitrary time lines for movement.

Considerations and next steps:

1. Identify where (if at all) tobacco is addressed in your current service array.
 - a. Diagnostic Assessment
 - b. Psychiatric Evaluation
 - c. ISP
 - d. Individual CPST/Counseling
 - e. Group CPST/Counseling
2. Identify which staff that may be especially interested in being involved in the implementation of this model.
3. Consider opportunities for tobacco information to be introduced into group and individual services.

Implementation planning notes:

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VII Strong Interdisciplinary Communication

Emerging evidence about the interplay between tobacco, psychopharmacological interventions, and behavioral health conditions highlights the potential for misinterpretation and misunderstanding of presenting symptoms and/or behaviors. It is imperative that effective interdisciplinary communication and collaboration exists among all involved with the consumer for continuity of care.

Considerations and next steps:

1. **Explore current documentation and communication methods, especially across disciplines and enhance, as needed.**
 - a. **How does direct-line staff inform prescribers about changes in consumer functioning or situations and vice versa?**

Implementation planning notes:

1. **What next steps are necessary to accomplish this task in our organization?**

2. **Who will be responsible to ensure these steps are taken?**

3. **What is the time frame for completion of this task?**

VIII Involving Natural Supports

Involvement of a consumer's natural supports is encouraged, e.g. family members, significant others, sponsor, employer, coworkers, group home operator, or others. Additional supports might include Consumer Operated Services (COS), self-help groups, Quitline, drop-in or social clubs, spiritual or religious organizations, or community centers.

Considerations and next steps:

- 1. Offer information to consumers and their natural supports about tobacco and tobacco cessation so that they are aware of your initiative and the role they play.**
- 2. Explore availability of and relationship with local Consumer Operated Services, NAMI and other supportive stakeholders.**
- 3. Build partnerships with consumer operated services and other advocacy groups in your community that might be interested in partnering to improve consumers quality of life.**

Implementation planning notes:

- 1. What next steps are necessary to accomplish this task in our organization?**

- 2. Who will be responsible to ensure these steps are taken?**

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IX Psychopharmacological Interventions

Nicotine Replacement Therapies (NRTs) and certain medications have been shown to be essential in helping people quit smoking. Physicians and nurses fulfill a pivotal role in prescribing medications and NRTs, increasing medication adherence, offering education, assessing and monitoring medication dosages and side effects as consumers reduce use of tobacco products. Special consideration needs to be paid to the unique cessation issues that exist for those with severe mental health and substance use conditions.

Considerations and next steps:

- 1. Convene a meeting with organization medical staff to develop consensus regarding commitment and approaches to tobacco treatment.**
- 2. Evaluate current employee insurance policies re: pharmacological interventions for tobacco.**
- 3. Advocate for and seek out sources for free or discounted NRTs and pharmacological interventions.**

Implementation planning notes:

- 1. What next steps are necessary to accomplish this task in our organization?**

- 2. Who will be responsible to ensure these steps are taken?**

- 3. What is the time frame for completion of this task?**

X Implementation and Intervention Monitoring

A consistent feedback process is imperative to foster successful implementation of the tobacco model. Outcomes data collection, reporting, and analysis are important to measure the impact of interventions (on consumers and staff) as well as the efficacy of the model. Outcomes will allow for further model development and evaluation to steer improvements. Fidelity assessment will be used in consultation with the organization to ensure a consistent implementation process and thus contribute to determining model efficacy. As always when learning a new model, organizations and staff will require consultation, training, and adequate supervision to begin and continually support the implementation process.

Considerations and next steps:

- 1. Convene implementation work team**
- 2. Develop an implementation plan.**
- 3. Arrange and complete a baseline fidelity visit with the Center for Evidence Based Practices.**

Implementation planning notes:

- 1. What next steps are necessary to accomplish this task in our organization?**

- 2. Who will be responsible to ensure these steps are taken?**

- 3. What is the time frame for completion of this task?**