

Documenting Tobacco Cessation Referrals for NFP instruction

Tobacco Cessation Referrals:

What are we measuring?



MIECHV Measure: Percent of primary caregivers enrolled in home visiting who reported using tobacco or cigarettes at enrollment and were referred to tobacco cessation counseling or services within 3 months of enrollment

Instructions:

Collect data at Intake, within 3 months of enrollment.

1. Ask whether the primary caregiver used tobacco in the last 48 hours. Tobacco includes combustibles (cigarettes, cigars, pipes, hookahs, and bidis), non-combustibles (chew, dip, snuff, snus, and dissolvables), and electronic nicotine delivery systems (e-cigarettes, vaping products).
2. If the caregiver reports using tobacco at enrollment, make a referral to tobacco cessation counseling or services within 3 months of enrollment.

Data Requirements: Enrollment date, tobacco use at enrollment, tobacco cessation referral date

Which form should I use to document Tobacco Screening?

Step 1: Use the Healthy Habits Form (Q3).

Health Habits



Client ID Client Name DOB

Date Nurse Home Visitor ID Nurse Home Visitor Name

Check one: Pregnancy Intake Pregnancy 36 Weeks Infancy 12 Months

- Remember to enter the date this assessment was done.
- Screening within 3 months of enrollment.

Step 2: Fill out the responses in the Health Habits Form.

- Please provide a response of either "Yes" or "No".

3. In the last 48 hours, have you used tobacco? By 48 hours, I mean from (TIME AND DAY OF WEEK) to (TODAY AND TIME).

Yes

If yes, please indicate the types of nicotine you used (please check all that apply) and how many times per day you used each.


- Electronic cigarette (E-cigarette) quantity/day
- Patches quantity/day
- Dissolvable Tobacco (strips, sticks, orbs and compressed tobacco, lozenges) quantity/day
- Cigars quantity/day
- Smokeless tobacco (chewing tobacco and snuff) quantity/day
- Cigarettes quantity/day
- Other (please specify) _____

No

Step 3: Enter the information on the Form into FLO.

Which forms should I use to document Tobacco Cessation Referrals?

Use the Referrals to Services Form to document a referral.



Referrals to Services

Client ID Client Name DOB


Nurse Home Visitor ID Nurse Home Visitor Name

Substance Abuse	
✓	11. Smoking Cessation

- Referral needs to be made within 3 months of enrollment; remember to enter the date.
- Referral date needs to be on or after the date of the positive screening.
- Check #11. Smoking Cessation.

Which forms should I use to document caregivers already in a smoking cessation program at intake?

If the caregiver is already in a smoking cessation program at intake, use the Use of Government & Community Services Form to document that they are already in service at intake. For caregivers already in service at intake, do not use Referrals to Services Form. These clients may be excluded from the measure.



Use of Government & Community Services

Client ID Client Name DOB

Date Nurse Home Visitor ID Nurse Home Visitor Name

◆ Record services used only at following time points:

Intake Infancy 6 Months Toddler 18 Months
 Infant's Birth Infancy 12 Months Toddler 24 Months

Service Utilization Response Key:

2 = Client or child is currently receiving this service

		Substance Abuse
2		11. Smoking Cessation

- Remember to enter the date this form was completed.
- Only clients that were already in service at intake are excluded from the measure.