

Documenting Tobacco Use Interventions and Services

Why Document?

- Treatment plans and notes provide a record of the work we are doing with people
- Creating plans that address smoking can be challenging when people have not yet identified wanting to change smoking as a goal. Motivational Interviewing (MI) has many tools to help people work through ambivalence involved with change
- Identifying a person's motivational stage regarding smoking is critical in developing an integrated person-centered, recovery-oriented treatment plan
- Change is more of a process than an outcome. Prochaska and DiClemente conceptualized the change process as a sequence of steps or stages
- Person-centeredness should drive treatment planning: What are the person's goals? What are realistic next steps to achieving those goals? What interventions will address the barriers getting in the way?

How to Document

- Review all assessment results with the person (MI strategy: "Feedback"), including the severity of substance use. Share results using MI style *without judgment or criticism*. Ask person what they think (MI strategy: "Open-ended question")
- Ask permission to propose treatment recommendations
- Document in assessment and progress notes the steps of this process
- How to document MI: What in MI Should We Document? The spirit (collaboration, acceptance, compassion, evocation be specific, use plain language), readiness for change (use tools like the importance ruler), the MI skills (OARS) and tools (decisional balance) used, the strategies you used for eliciting change talk, decreasing sustain/discord, solidifying commitment to change, and how you used Motivational Interviewing to develop the person's plan for change

What to Document

- Engagement is a critical first step in the assessment process
- Assessment is a clinical, not just an administrative, activity
- There are a variety of assessment tools for tobacco use: Heaviness of Smoking Index (two questions from the Fagerstrom Questionnaire); Fagerstrom; Self-Assessment from the Learning About Healthy Living (LAHL) manual; CAGE modified for smoking; ASSIST

• Stages of Change: Precontemplation ("*I don't want to stop smoking*"), Contemplation ("*Sometimes I feel like I smoke too much but I feel like I can't stop*"), Preparation ("*I am ready to stop smoking*"), action ("*I'm not smoking anymore*"), and Maintenance ("*I haven't had a cigarette for 6 months*")

EXAMPLES OF DOCUMENTING EACH STAGE OF CHANGE

Pre-Contemplation Stage: Documenting Tobacco Use When Quitting is Not the Goal

A person in pre-contemplation stage has no interest in currently addressing their tobacco use. With a dangerous health problem like smoking, it is important to understand what their treatment goals are, and to ask them to consider how smoking might impact those goals.

Pre-Contemplation: Assessment and Feedback Example		
Method of Assessment	Heaviness of Smoking Index	
Assessment Results	Score=5 (High Dependence)	
Feedback and Plan	 Reviewed results with person using Elicit-Provide-Elicit model: Asked permission to discuss risks associated with this level of smoking. Person gave permission. Gave advice (with permission) that they consider treatment options like the nicotine replacement patch Asked what they thought of the information and advice Person responded that they didn't think smoking was a problem for them 	

Pre-Contemplation Stage Treatment Plan

- Raise issue of smoking during treatment planning: "What concerns do you have about your smoking?"
- If they say, "I like smoking, I am not worried about it," you can then "shift focus" and ask "What would you like to work on?"
- Whatever their goals are, when you get to the barrier section you can ask, "What impact do you see smoking might have on achieving your goal?"

Document under barriers (see treatment plan example)

Pre-Contemplation Treatment Plan Example	
Goal: Get a job	
Strengths: Self-reliant	Barriers: Needs to smoke frequently while at work
Steps:	

- 1. Ask the person what barriers could get in the way of getting a job
- 2. If they do not mention smoking, ask how smoking might affect their ability to get a job (MI strategy: "Developing discrepancy")
- 3. If they say they have to smoke a lot during the day, that can be listed as a barrier
- 4. Propose, with permission, that they consider using the patch while at work

Pre-Contemplation Stage Progress Notes

- Document in more detail the MI strategy you used during the assessment and treatment planning process
- Document what efforts you made in developing a collaborative relationship
- Document how you raised the topic of smoking
- Document person's interest in changing tobacco use, i.e. "I have no interest in quitting smoking"
- Document your response: "This is just not the right time to think about cutting back on your smoking. What would you like to work on?" (MI strategy: "Shifting focus") and the person's response: "I would like to get a job" (No need to include here the specific MI strategies you used)

Pre-Contemplation Progress Note Example	
Tobacco Use	
Progress Note	Raised possible risk if continues to smoke. Person stated, "I have no interest in quitting." Shifted focus by stating, "This does not seem to be the right time for you to think about changing your smoking. What would you like to work on?" Person responded, "I would like to get a job." (You don't have to document the specific MI strategies you use unless you want to.) In discussing steps to getting a job, asked how smoking might impact on this goal. Person reported need to smoke frequently. Discussed how this could be a barrier to getting a job.

Contemplation Stage: Documenting Tobacco Use When a Person Has Ambivalence

• In this stage, an individual expresses ambivalence, or conflicting feelings, about making a change. With a dangerous health problem like smoking, the treatment goal would be to help the person resolve their ambivalence and tilt the balance towards changing.

Contemplation: Assessment and Feedback Example		
Method of Assessment	Heaviness of Smoking Index	
Assessment Results	Score=5 (High Dependence)	
Feedback and Plan	 Reviewed results with person using Elicit-Provide-Elicit model: Asked permission to discuss risks associated with this level of smoking. Gave advice (with permission) that they consider treatment options like the patch Asked what person thinks. Person responded that they would like to stop smoking but feels they need to smoke to relax. 	

Since this person has mixed feelings about smoking, there are many options and tools you can use to help them explore their ambivalence and move towards changing their tobacco use. These include motivational interviewing strategies for eliciting change talk and providing information on health hazards, as well as using other tools and interventions.

Contemplation Treatment Plan Example		
Goal: Decide if I should stop smoking		
Strengths: Persistence, resourcefulness	Barriers: Smoking helps relax	
Possible Interventions and Action Steps		
1. Use decisional balance to explore mi	xed feelings	
2. Explore past successes at making a change		
3. Ask open questions that elicit change talk ("What might the benefits be if you reduced or stopped smoking?")		
4. Elicit person's ideas about alternatives for relaxing		

- 5. Use EPE for giving information on health risks and other consequences
- 6. Attend a Learning About Healthy Living group

Contemplation Stage Progress Notes

- Document person's ambivalence in changing tobacco use: "I want to quit but smoking really helps me relax."
- Document how you used Elicit-Provide-Elicit strategy to give more information on health impact of cigarettes.
- Document eliciting change talk: "Writer asked, 'If you don't stop using tobacco, what is the worst thing you think would happen?' Person responded: 'I might get cancer.'"
- Document if you used an open-ended question to elicit other worries about smoking, i.e. "Tell me more about that" and person responded, "I am really worried about dying." You can also document MI tools such as the importance and confidence ruler and/or the decisional balance.

Contemplation Progress Note Example	
Progress Note	Person has mixed feeling about quitting smoking. Would like to quit but worries about not having cigarettes to help her relax. I asked Person what is the worst thing she can imagine if she doesn't quit and she said she might get cancer. We used the decisional balance exercise to explore the benefits she sees if she does quit smoking.

Preparation Stage: Documenting Tobacco Use When a Person Commits to Addressing It

• At this stage, you want to help the person articulate their goals related to tobacco use and begin developing a plan. In addition, you want to help build self-efficacy and strengthen commitment to making the change. The goals and next steps identified can be documented in the person's treatment plan, along with the specific actions (interventions) the treatment team and person will take.

Preparation Stage Treatment Plan Example		
Goal: To stop smoking		
Strengths: Motivated, family support	Barriers: Stress/unable to relax	
Possible Interventions and action steps1. Start wearing NRT patch and using NRT lozenges by the beginning of next week		

2. Throw out all the cigarettes and get rid of the ash tray

- 3. Continue to get support from the wellness group
- 4. Keep a card in wallet that list the reasons to stop smoking
- 5. Start a yoga class
- 6. Attend a Learning About Healthy Living I group
- 7. Let family know the plan

Preparation Stage Progress Notes

Document the strategies you used for building and strengthening commitment and for helping the person develop their plan.

Prepa	Preparation Stage Progress Note Example		
Progress Note	Person wants to stop smoking. Worked first on building and strengthening their commitment to stop smoking. Asked Person to look back at past successes and what worked then. Used the confidence ruler to elicit self-efficacy. This writer acknowledged Person's efforts thus far and summarized the their reasons for changing. The writer then asked open-ended questions to clarify goals and next steps: "What steps are you <i>willing</i> to take this week?" "I know how important quitting smoking is for you. What will you do to change your smoking?" "What do you think would be some do-able steps for you to stop smoking?" "What are you going to do first?" "When do you want to start on your plan?"		

Action Stage: Documenting Tobacco Use When a Person Takes Steps to Reduce or Stop Smoking (up to 6 months)

At this stage, you want to help the person follow through with their reduction or quit plan. You want to continue to support them by talking through and planning for challenging situations, and by evaluating the effects of any medications being used in collaboration with the prescribing clinician. You also want to continue affirming the person's efforts to make the change. The goals and next steps identified can be documented in the person's treatment plan, along with the specific actions (interventions) the treatment team and individual will take.

	Action Stage	Treatment Plan Example
Goal: '	To not smoke for the next 6 month	S
Strengths: Strong-willed		Barriers: Social group smokes
Possib	le Interventions and Action Step	<u> </u>
1.	Develop a quit plan and decide on	a quit date
2. Talk with prescribing clinician about NRTs and medications		
3. Talk with smoke-free peers and/or relatives about the plan		
4. Attend Learning About Healthy Living II group		
5. Practice cigarette refusal skills		
6. Learn how to handle setbacks		
7	Plan rewards for every week with	out smoking

Action Stage Progress Notes

Document how you helped the person to develop a quit plan and work through their successes and challenges.

Action Stage Progress Note Example	
Progress Note	Person said that they are ready to set a quit date. Writer helped
	the person pick a date after appointment with their doctor to
	talk about medications for smoking. Person identified two
	people they want to tell about their plan and said they will
	speak with them in the next week. Writer talked with the
	person about joining Learning About Healthy Living group II
	for support. Person said they want to see how they feel after
	they stop. Person said they are worried and excited about
	quitting. Writer reflected, "Stopping smoking is a big change
	and you've worked hard to get there." Person thanked writer
	for help.
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Maintenance Stage: Documenting Tobacco Use When a Person Has Not Smoked for at least 6 months

You want to work with the person to sustain their abstinence by continuing to work on skills like managing cravings and developing a tobacco-free lifestyle. You can also celebrate with the person and encourage them to develop their own ways of rewarding their success. The goals and next steps identified can be documented in a person's treatment plan, along with the specific actions (interventions) the treatment team and individual will take.

Maintenance Stage Treatment Plan Example		
Barriers: Daily stressors		
1. Update list of benefits from not smoking		
2. Use money saved to purchase a new TV or smart phone		
3. Review strategies for managing cravings		
4. Discuss new goals		
5. Use groups to share quitting experience and support others		
6. Congratulate yourself		

Maintenance Stage Progress Notes

Document what the person has done to be successful and how they are working toward a tobacco-free lifestyle.

Rela	Relapse Prevention Stage Progress Note Example	
Rela Progress Note	pse Prevention Stage Progress Note ExamplePerson started the meeting by saying that they have not picked up a cigarette in 8 months. Person said they can now walk a longer distance than they have been able to in a long time. Writer asked about what's been helpful to them. Person said they didn't think about smoking as much after starting Chantix. They also said they told their roommate to try to not smoke in the apartment, especially when the person is home.	
	Person said they bought a train ticket with the money they saved and is looking forward to visiting their brother in Cincinnati. Person said they think about smoking sometimes, like when they are home on the weekend, but calls a friend or goes for walk. Writer reflected person's excellent problem- solving skills.	