

## Clinical Best Practice Gets Results in one Native American Setting

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*Abstract:* The Puyallup Tribal Health Authority (PTHA) in Tacoma Washington serves 10,000 American Indian/Alaska Native (AI/AN) people at their multi-disciplinary ambulatory care facility. In 2001 PTHA began a systematic approach to address the chronic disease of tobacco use. The goal of this quality improvement project was to assess whether the integration of clinical interventions used to reduce tobacco use in mainstream clinics would produce the same positive outcomes in a clinic serving only AI/AN people. There was no research on AI/AN clinics to guide the process. The intervention was the integration of the Public Health Service (PHS) Clinical Practice Guidelines for the Treatment of Tobacco Use. The methods included: community development strategies, community capacity building, assessment, training, and data collection.

Three process measures were established for evaluation purposes: provider compliance with clinical brief interventions, chart identification, and tobacco use assessment. Process measures were assessed quarterly with the implementation of the Guidelines in 2002. Benchmark outcomes were established for each process measure to keep implementation on track and assess for barriers to implementation. Clinic visits for upper respiratory infection, cough, and asthma were monitored to determine if reduced smoking rates would positively impact patient health. Between 2000 and 2008 the adult smoking rate reduced by 26% (55% to 39%). As smoking rates decreased, clinic visits for upper respiratory infection, cough and asthma decreased by 67 percent. The conclusion is that the PHS Clinical Practice Guidelines for the Treatment of Tobacco Use produces the same positive outcomes in an AI/AN clinic as in mainstream clinics.