

HAB HIV Core Clinical Performance Measures for Adult/Adolescent Clients: Group 3



Performance Measure: Tobacco Cessation Counseling		OPR-Related Measure: No																									
Percentage of clients ¹ with HIV infection who received tobacco cessation counseling within the measurement year																											
Numerator:	Number of HIV-infected clients who received tobacco cessation counseling																										
Denominator:	Number of HIV-infected clients who: <ul style="list-style-type: none"> used tobacco products within the measurement year; and had a medical visit with a provider with prescribing privileges² at least once in the measurement year 																										
Patient Exclusions:	1. Patients who deny tobacco use throughout the measurement year																										
Data Elements:	1. Is the client HIV-infected? (Y/N) <ul style="list-style-type: none"> a. If yes, did the client use tobacco during the reporting period? (Y/N) <ul style="list-style-type: none"> i. If yes, did the client receive tobacco cessation counseling during the measurement year? (Y/N) 																										
Data Sources:	<ul style="list-style-type: none"> Electronic Medical Record/Electronic Health Record CAREWare, Lab Tracker, or other electronic data base HIVQUAL reports on this measure for grantee under review Medical record data abstraction by grantee of a sample of records Billing records 																										
National Goals, Targets, or Benchmarks for Comparison	National HIVQUAL Data: ³ <table border="1" style="margin-left: 20px;"> <thead> <tr> <th></th> <th>2003</th> <th>2004</th> <th>2005</th> <th>2006</th> <th>2007</th> </tr> </thead> <tbody> <tr> <td>Top 10%</td> <td>100%</td> <td>100%</td> <td>100%</td> <td>100%</td> <td>100%</td> </tr> <tr> <td>Top 25%</td> <td>93.3%</td> <td>97.8%</td> <td>98.4%</td> <td>100%</td> <td>100%</td> </tr> <tr> <td>Mean*</td> <td>69.3%</td> <td>75.0%</td> <td>76.8%</td> <td>81.8%</td> <td>83.8%</td> </tr> </tbody> </table> <p style="margin-left: 20px;">* HAB database</p>				2003	2004	2005	2006	2007	Top 10%	100%	100%	100%	100%	100%	Top 25%	93.3%	97.8%	98.4%	100%	100%	Mean*	69.3%	75.0%	76.8%	81.8%	83.8%
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Outcome Measures for Consideration:	<ul style="list-style-type: none"> Rate of head & neck and lung cancer Rate of tobacco use in the clinic population 																										
Basis for Selection and Placement in Group 3:																											
<p>A recent study has shown that lung cancer rates are 2.7 times greater for people living with HIV.⁴ As tobacco use among HIV-infected patients poses significant health risks, tobacco-dependent patients should be provided assistance to enroll in smoking cessation programs. Various studies have shown that brief interventions by the clinician to encourage tobacco cessation and offer substitution programs can decrease smoking rates⁵ and tobacco use.⁶ Cessation reduces the risk of incidence or the progression of tobacco-related diseases and increases life expectancy.^{7,8,9} HIV care providers should provide cessation assistance in the form of counseling, pharmacotherapy or referral to cessation programs.</p>																											

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The measure was placed in Group 3 because the feasibility of data collection can vary considerably across grantees.

US Public Health Guidelines:

“The U.S. Preventive Services Task Force strongly recommends that clinicians screen all adults for tobacco use and provide tobacco cessation interventions for those who use tobacco products.”¹⁰

References/Notes:

¹ “Clients” includes all clients aged 13 years and older.

² A “provider with prescribing privileges” is a health care professional who is certified in their jurisdiction to prescribe medications.

³ Tobacco Use

(<http://www.hivguidelines.org/admin/files/qoc/hivqual/proj%20info/HQNatlAggScrs3Yrs.pdf>)

⁴ Philips, Abs 8, CROI, Boston, 2008.

⁵ Page AR, Walters DJ, Schlegel RP, Best JA. Smoking cessation in family practice: The effects of advice and nicotine chewing gum prescription. *Addict Behav* 1986;11(4):443-6.

⁶ Demers RY, Neale AV, Adams R, Trembath C, Herman SC. The impact of physicians' brief smoking cessation counseling: A MIRNET study. *J Fam Pract* 1990;31(6):625-9.

⁷ Rigotti NA. Treatment of tobacco use and dependence. *N Engl J Med* 2002;346:506-512.

⁸ Lancaster T, Stead L, Silagy C, Sowden A. Effectiveness of interventions to help people stop smoking: findings from the Cochrane Library. *BMJ* 2000;321:355-8.

⁹ Methods, Successes, and Failures of Smoking Cessation Programs E B Fisher Jr., E Lichtenstein, D Haire-Joshu, G D Morgan, H R Rehberg *Annual Review of Medicine*, February 1993, Vol. 44, Pages 481-513.

¹⁰ Agency for Healthcare Research and Quality. *The Guide to Clinical Preventive Services: Recommendations of the U.S. Preventive Services Task Force*, June 2006, p. 120.