

SAMHSA-HRSA Center for Integrated Health Solutions

Enhancing Motivation to Quit: CO Monitors and Other Biologic Tools

April 11, 2013





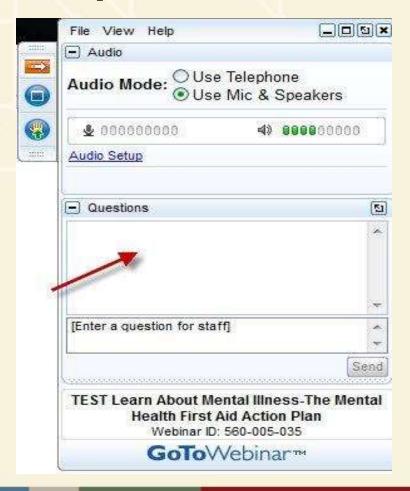
Agenda

- Poll Questions
- Overview of CO monitors and other biologic tools
 - Chad Morris, Behavioral Health and Wellness Program, University of Colorado
- From the Field Perspective
 - Karen St. John and Nancy Callahan, Glenn County Health Services Agency
- Q&A





How to Participate







Poll Question

Are you using CO monitors in your PBHCI program?

- Yes, we use it as part of the data we collect for NOMs but struggle on how it can inform our tobacco cessation work
- Yes, it is a tool we use to inform our tobacco cessation work and track success
- No, but we would like to begin use within the next few months
- No, we are thinking of using one but are unsure of the value it would bring to our tobacco cessation work
- No, we have no plans to begin use in the immediate future





Poll Question

If you use a CO monitor, how frequently do you measure breath CO?

- Weekly
- Monthly
- Quarterly
- Twice a year
- Yearly





Glenn County Health Care Collaborative Integrating Health and Behavioral Health Using A Carbon Monoxide (CO)Monitor To Reduce Smoking Behavior

SAMHSA/HRSA Center for Integrated Health Solutions

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Breath CO Monitor

piCO+ Smokerlyzer®

- Glenn County has used the CoVita piCO+ Smokerlyzer® for the past two+ years
- We have had excellent success!
- The CO Monitor provides ongoing numerical feedback to clients to help them understand the consequences of smoking

Breath CO Monitor

piCO+ Smokerlyzer®

- Smokerlyzer® is the trade name for Bedfont Scientific's line of breath carbon monoxide (CO) monitors and testers
- The Smokerlyzer® measures the level of carbon monoxide (CO) in a person's lungs and bloodstream through a simple breath test
- The test takes only a few seconds and provides a personalized reading

Breath CO Monitor (continued)

piCO+ Smekerlyzer*

Visually motivational breath carbon monoxide (CO) monitor



Breath CO Monitor (continued)

Immediate Feedback to the Client

- "Seeing is believing". We have had many clients who smoke, and 'know' it is bad for them. But, they don't have any way of knowing 'how bad'
- The Smokerlyzer[®] shows numerical evidence of the dangerous toxins
- Once a person sees their initial results, they are immediately interested in finding out how to correct the problem

Breath CO Monitor (continued)

Measure of success: When a person initially stops smoking, it is difficult to have immediate feedback on the tangible benefits.

- The data from the Smokerlyzer® provides immediate feedback that they can use to track their progress and see the real, instant results of quitting smoking
- A person can see the benefits of quitting smoking within 1 to 2 days of stopping!
- By having immediate feedback by seeing a smaller number, gives very important information and reassurance that quitting smoking is working!

People are immediately rewarded for quitting smoking!

Nurse's Experience with Breath CO Monitor

New Clients

The Registered Nurse meets with each client who is new to the PBHCI Project, and completes the Nursing Intake Packet.

She discusses the following:

- Explains that we collect Breath CO Levels every six months as part of our data collection / evaluation
- Explains that all clients are tested (both smokers and non-smokers)
- Measures the Breath CO Level of each client (this takes about 30 seconds)
- Discusses the score, shows the different levels, and risk levels

Nurse's Experience with Breath CO Monitor (continued)

Results

All the clients are very interested in their scores and remember them when it is time to re-measure.

We also make the CO Monitor available, whenever the client asks for a remeasurement.

We have had some clients who were surprised with their results:

- Clients who smoke 2 packs a day, but don't think there is any health impact
- Clients who don't smoke, but live with smokers
- How quickly their score starts to come down, when they stop smoking
- How their score increases when they smoke more (because they are hanging out with others who smoke, so they start smoking more)

Nurse's Experience with Breath CO Monitor (continued)

Breath CO Monitor Ranges

CO ppm	
51+	Dangerously Addicted Smoker
36-50	Heavily Addicted Smoker
26-35	Addicted Smoker
16-25	Frequent Smoker
11-15	Smoker
7-10	Danger Zone
0-6	Non-Smoker



Nurse's Experience with Breath CO Monitor (continued)

Referrals to Kickin' Butts

The Nurse asks the client if they are interested in joining one of the Smoking Cessation classes/groups, at our Wellness Center (Harmony House).

She shares information with the client about other Wellness Center groups available:

- Relaxation
- Meditation
- Yoga

The Nurse also offers to re-measure the client with the CO Monitor whenever the client requests.

System-Level Outcome Data: Breath CO

System-Level Outcome Data

We also developed system-level outcome data on our clients' Breath CO Scores.

These graphs illustrate clients' improvement, or regression, on their Breath CO Scores over time (at baseline, every six month's reassessment, and/or at discharge).

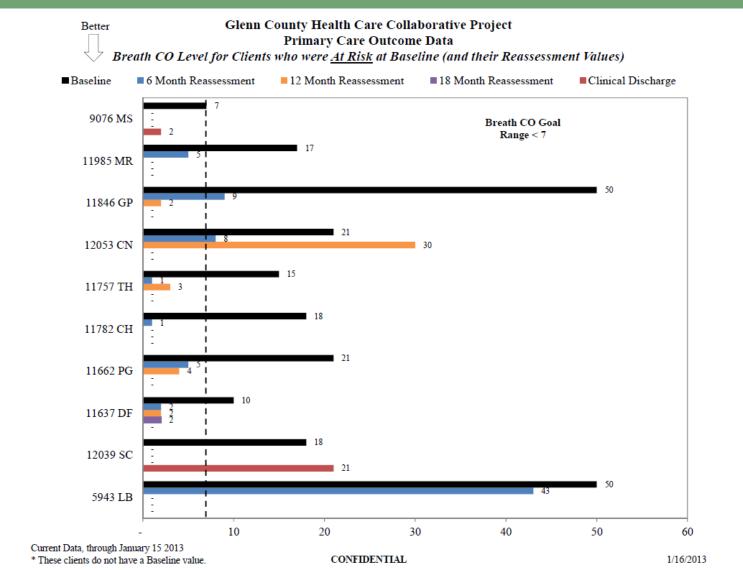
The following slide provides an example of the outcome data for Breath CO scores at baseline and later administrations.

We examine this data for clients who have an 'At Risk' Score at Baseline.

The following graph shows data for each client at baseline (black bar), six months (blue bar), 12 months (orange bar), 18 months (purple bar), and at discharge (red bar).

By showing outcome data for several clients on one page, staff can quickly determine who is successful, and who needs additional support in stopping smoking.

System-Level Outcome Data: Breath CO



Individual Wellness Reports

Individual Wellness Reports

We also give clients Individual Wellness Reports every six months.

These Wellness Reports show the client's score on a number of different health indicators:

- Breath CO
- Body Mass Index
- Cholesterol
- A1c (Blood Sugar/Diabetes)

This tool helps **clients** understand their health indicators and shows their progress (e.g., level of improvement from baseline) over time.

The Wellness Reports have also been effective in helping Behavioral Health staff to better understand these health indicators, and develop programs to support clients to improve their health over time.

Individual Wellness Reports

Glenn County Health Care Collaborative

INDIVIDUAL WELLNESS REPORT

Name: Bea Well
Clinician: John Smith
Case Manager: Jane Doe



☐ Normal*
☐ Caution

At Risk

Progress on Key Health Indicators

Category	Indicator (Goal)	Baseline August 2011	6-Month Reassessment February 2012	12-Month Reassessment July 2012
Lungs	Breath CO (0-6)	25	8	5
Weight	BMI (18.5-24.9)	25.8	28.1	25.3
	Weight	162.0	174.0	158.0
	Waist Circumference	35.5	31.5	32.2
Blood Pressure	Systolic BP (90-140)	133	135	114
	Diastolic BP (60-90)	80	75	80
Blood Sugar	Fasting Glucose (70-99)	115	-	115
	Hemoglobin A1C (4.0-5.6)	5.4	193	5.4
	Total Cholesterol (125-200)	197		189
TT TT141	I.DI. Chalesterol (20-120)	14	103	
Heart Health	HDL Cholesterol (40+)	76		_
	Triglycerides (30-149)	52	(7)	64

Client Wellness Goal(s):

Bea Well will lose 5 pounds within 6 months.

Bea Well will maintain her excellent progress in reducing/stopping her tobacoo use.

Client Mental Health Goal(s):

Bea Well will sleep at least 7 hours each night to decrease symptoms of depression.

Action Step(s):

Bea Well will walk for 20 minutes five days per week.

Bea Well will eat at least 3 servings of vegetables every day.

Bea Well will go to bed by 10 pm at least 5 nights per week.

Client Signature:	Bea Well	Staff Signature:	John Smith	Date:	9/15/2012	
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Breath CO Monitor Information

CoVita piCO+ Smokerlyzer® purchasing information and supplies below:

Website:

http://www.covita.net/pico+.html

Product:

CoVita piCO+ Smokerlyzer®, \$620.00

Needed Accessories:

- Flatpak Mouthpieces, \$42.00 (box of 250)
- D-Piece, \$103.00 (box of 12)
- Instrument Cleansing Wipes, \$17.50
- Calibration Kit, \$198.00

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QUESTIONS AND ANSWERS





Thank You!

- Please take a few moments to complete the postwebinar survey
- Save the Date for Part 3: Motivational Interviewing for Prescribers, May 9, 2-3:30 PM EDT
- Reminder: Presentation abstracts for (tentative) grantee meeting are due Monday, April 15
 - For abstract form: http://www.integration.samhsa.gov/pbhci-learning-community/2013-annual-grantee-meeting
 - Submit to Hannah Mason, hannahm@thenationalcouncil.org



