A systematic approach to smoking cessation in regional cancer centres in Ontario, Canada

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Background: Cancer patients who continue to smoke gain less benefit from treatments, experience greater toxicities, are at increased risk of cancer recurrence and second primaries, experience poorer quality of life and decreased survival. Despite awareness of the negative health benefits of continued smoking after a diagnosis of cancer, a systematic approach to help newly diagnosed cancer patients in cancer centres to quit smoking is uncommon.

Methods: In 2012, Cancer Care Ontario established a framework to implement smoking cessation (SC) in all 14 regional cancer centres (RCCs) in the province of Ontario, Canada. The Framework included: use of the 5A’s (ask, advise, assess, assist, arrange), recruitment of regional champions to promote the program, and data collection to document that new ambulatory cancer patients were screened for smoking status, advised on the health benefits of cessation and recommended a referral for cessation support. Screening rates became a performance metric to drive implementation and were reviewed quarterly with provincial and regional leaders. During fiscal 2014/15, just over 50% of patients were screened for smoking status. Recent efforts to improve performance include the transition to the 3A’s (ask, advise, act) model, using proportion of smokers accepting a referral for SC services as a performance metric, and use of an “opt-out” approach to referrals where tobacco users are automatically referred to cessation services. An environmental scan and site visits resulted in RCC site-specific improvement plans.

Results: The majority of RCCs are exceeding the screening target of 70% (5 centres with proportions > 80%) but the proportion of smokers accepting a referral remains low. The opt-out referral approach is anticipated to increase referral rates and preliminary data are encouraging for centres that have transitioned to the opt-out approach.

Conclusions: To improve program efficiency and impact, Cancer Care Ontario’s provincial smoking cessation initiative has transitioned from a 5 to 3 A’s model and introduced an opt-out referral process. Front-line staff are adopting the simplified approach and early results show a promising increase in the number of smokers accepting referrals for SC services.

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