



# The Oral Health Impact: Tobacco, Marijuana, and Vaping in Patients in Public Housing

# National Center for Health in Public Housing

## Disclaimer

The National Center for Health in Public Housing (NCHPH), a project of North American Management, is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U30CS09734, a National Training and Technical Assistance Cooperative Agreement (NCA) for \$608,000, and is 100% financed by this grant. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.

The mission of the National Center for Health in Public Housing (NCHPH) is to strengthen the capacity of federally funded Public Housing Primary Care (PHPC) health centers and other health center grantees by providing training and a range of technical assistance.



Training and  
Technical  
Assistance



Research and  
Evaluation



Outreach and  
Collaboration

**Increase access, quality of health care, and improve health outcomes**



MUTE



CHAT



RAISE HAND



Q&A





National Center for Health in Public Housing  
*a project of North American Management*



National Network for Oral Health Access



# Panelists

- Robert Burns, Director, National Center for Health in Public Housing (NCHPH)
- Candace Owens, Education Director, National Network for Oral Health Access (NNOHA)
- Sam Wakim, Chief Dental Officer, Zufall Health Center



# **Tobacco Use in Public Housing:**

# **Impact, Smoke Free Rule, and Tobacco Cessation**

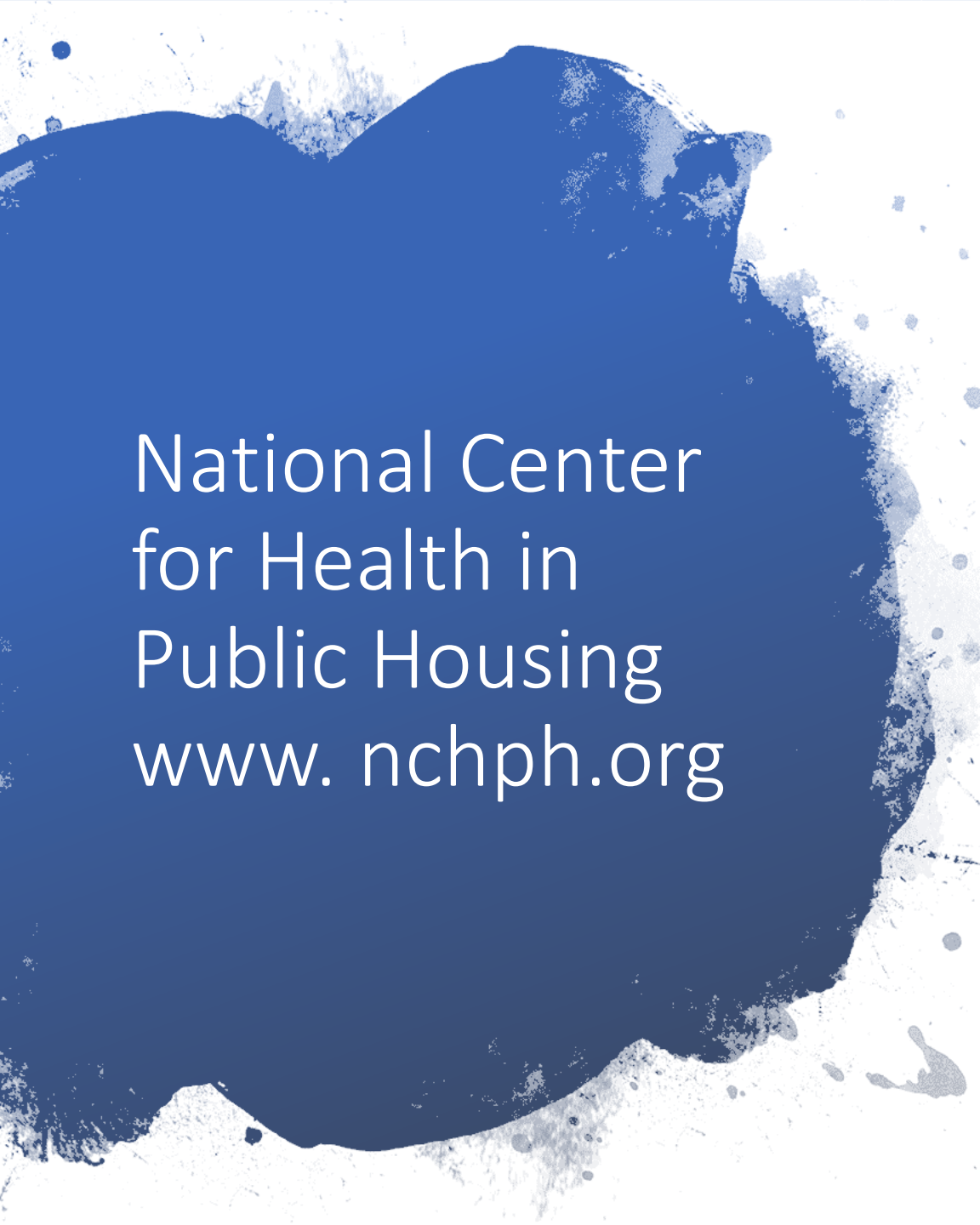


February 21, 2020

# National Center for Health in Public Housing



This presentation is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$608,000 with 0 percent financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit [HRSA.gov](https://www.hrsa.gov).



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[www.nchph.org](http://www.nchph.org)

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# Agenda

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- Tobacco Use in Public Housing
- Smoking Ban Update – Brief Context/History
- Vapes and Marijuana
- NCHPH Activities on Smoking Cessation
- How Health Centers and Public Housing Agencies (PHAs) can work together
- Resources





## Public Housing Demographics

1.8 million  
residents

2.1 persons/  
household

38% children

59% female

55% less than high  
school diploma

83.2% below  
federal poverty

17% seniors  
≥ 62

21% of households  
include a disabled  
member



# A Health Picture of HUD Assisted Adults 2006-2012\*

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Adults that receive assistance from HUD have higher rates of chronic health conditions and are greater utilizers of health care than the general population.

- 35.8% are in fair or poor health vs. 13.8% of other adults
- 71% are overweight or obese vs. 64% of other adults
- 61% have a disability vs. 35.4% of other adults
- 17.6% have diabetes vs. 9.5% of other adults

\*Updated edition expected in Summer 2020.



# A Health Picture of HUD Assisted Adults 2006-2012\*

Adults that receive assistance from HUD have higher rates of chronic health conditions and are greater utilizers of health care than the general population.

- 39.3% with distress with mental hardship vs. 21.4% of other adults
- 11.6% have serious psychological distress vs. 3.7% of other adults

NCHPHA  
National Center for Health in Public Housing

--In the U.S., 40% of all cigarettes consumed by adults are consumed by adults with some form of Mental Illness. (CDC)



\*Updated edition expected in Summer 2020.

# A Health Picture of HUD Assisted Adults 2006-2012\*

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Adults that receive assistance from HUD have higher rates of chronic health conditions and are greater utilizers of health care than the general population.

- 30.1% with usual source of care as Clinic or Health Center vs. 17.3% of other adults
- 44.1% with a dental visit vs. 59.9% of other adults
- 17.5% have complete tooth loss vs. 8.3% of other adults

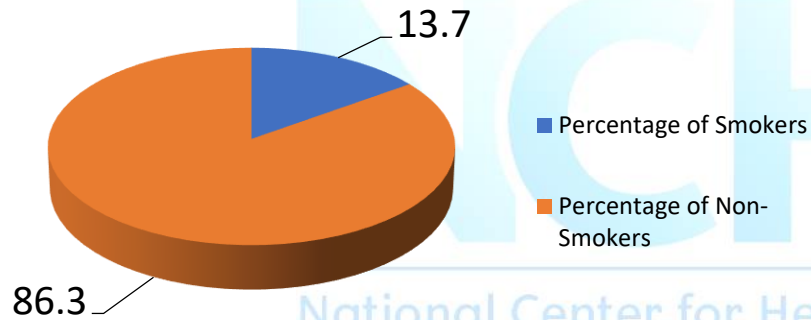
National Center for Health in Public Housing



\*Updated edition expected in Summer 2020.

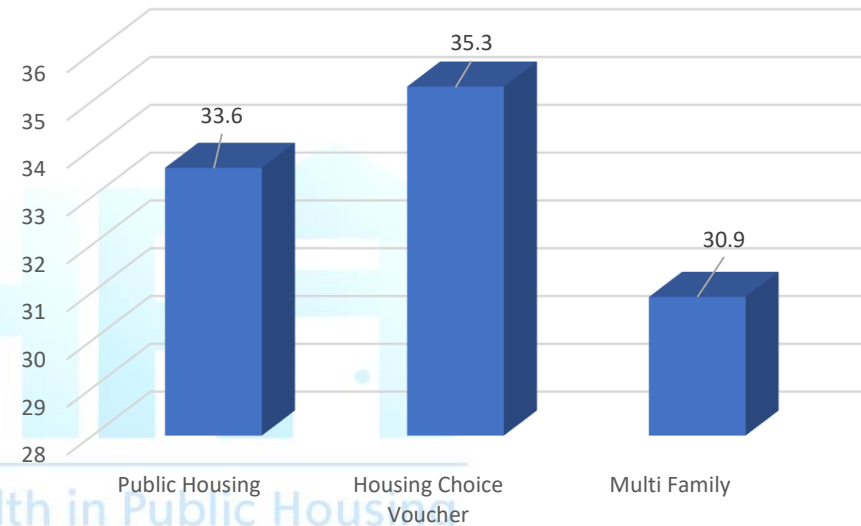
# Cigarette Smoking: National Vs. Housing Data

### Cigarette Smoking U.S. Adults Aged 18 Years and Older in 2018



Source: Centers for Disease Control and Prevention

### Cigarette Smoking – HUD Programs



Source: Cigarette smoking and adverse health outcomes among adults receiving federal housing assistance - HUD

# Tobacco-Related Illnesses Exacerbated by Secondhand Smoke in HUD Housing-Assisted Programs



- 13.6% have COPD vs. 6.3% of other adults
- 16.3% have asthma vs. 8.7% of other adults
- 33.5% are current smokers vs. 22% of other adults

Source: A Health Picture of HUD-Assisted Adults 2006-2012

# Facts to Remember

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Approximately 480,000 Americans die from smoking each year, including 41,000 from second-hand smoke (SHS) exposure. Smoking is the number one cause of preventable death in the U.S., and 34,000,000 still smoke.

One-third of adults living in public housing currently smoke cigarettes, which is approximately double the smoking rate in the general population.

Since August 1, 2018, due to HUD's Smoke Free Public Housing Rule, Smoking has been prohibited in the Nation's 3100 public housing agencies. This policy protects the Nation's 2 million public housing residents from second-hand smoke.

# Smoke-Free Public Housing



NCH  
National Center for Health in Public Housing

- On December 5, 2016, The U.S. Department of Housing and Urban Development (HUD) published a final rule requiring all Public Housing Agencies (PHAs) administering low-income, conventional public housing to initiate a smoke-free policy.
- The Rule was effective on February 3, 2017 with an 18-month implementation period.
- Effective August 1, 2018 Public Housing was Smoke-Free



# What Does the Smoke-Free Rule Mean?

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- No one is permitted to smoke anywhere inside the apartment building or outside within 25 feet of the building.
- Policy applies to every member of the household, as well as all visitors.
- This policy does not mean that residents who smoke cannot reside in the housing properties.



# What is and is not included in the rule?

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## Included:



- Rule only covers Lit Tobacco Products where the tobacco leaves are ignited, such as cigarettes, cigars and pipes.
- Water pipes (hookahs)

## NOT Included:



- Electronic Nicotine Delivery Systems (ENDS), i.e., Vapes, E-Cigarettes
- PHA's discretion

# Use of Marijuana in Public Housing



NOT covered by the rule. Governed by other Federal Law and Regulation.

Quality Housing and Work Responsibility Act (QHWRA):

- New Admission of medical marijuana users: prohibited
- Current residents:
  - Prohibited
  - Case-by-case basis

# Benefits of the Rule

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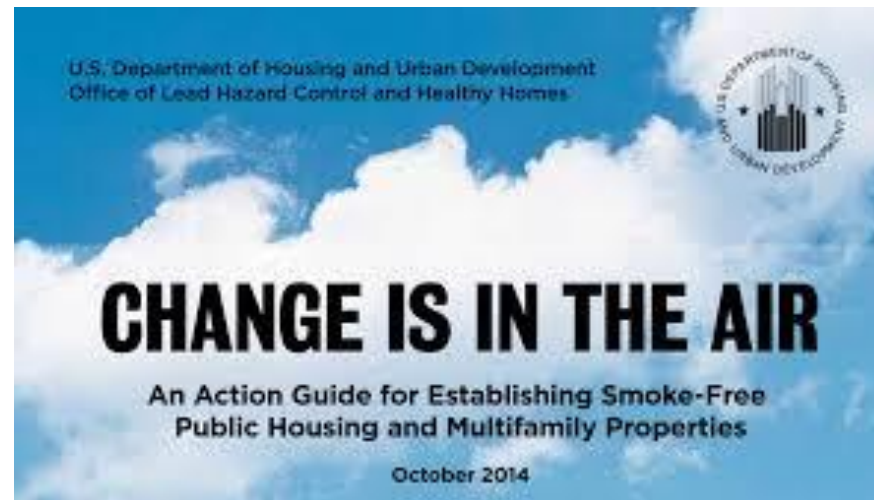
- Over 900,000 units impacted by this rule (including over 500,000 units inhabited by elderly households or households with a non-elderly person with disabilities)
- Non-smoking residents able to experience health benefits from a **reduction of exposure to SHS**



# Benefits of the Rule

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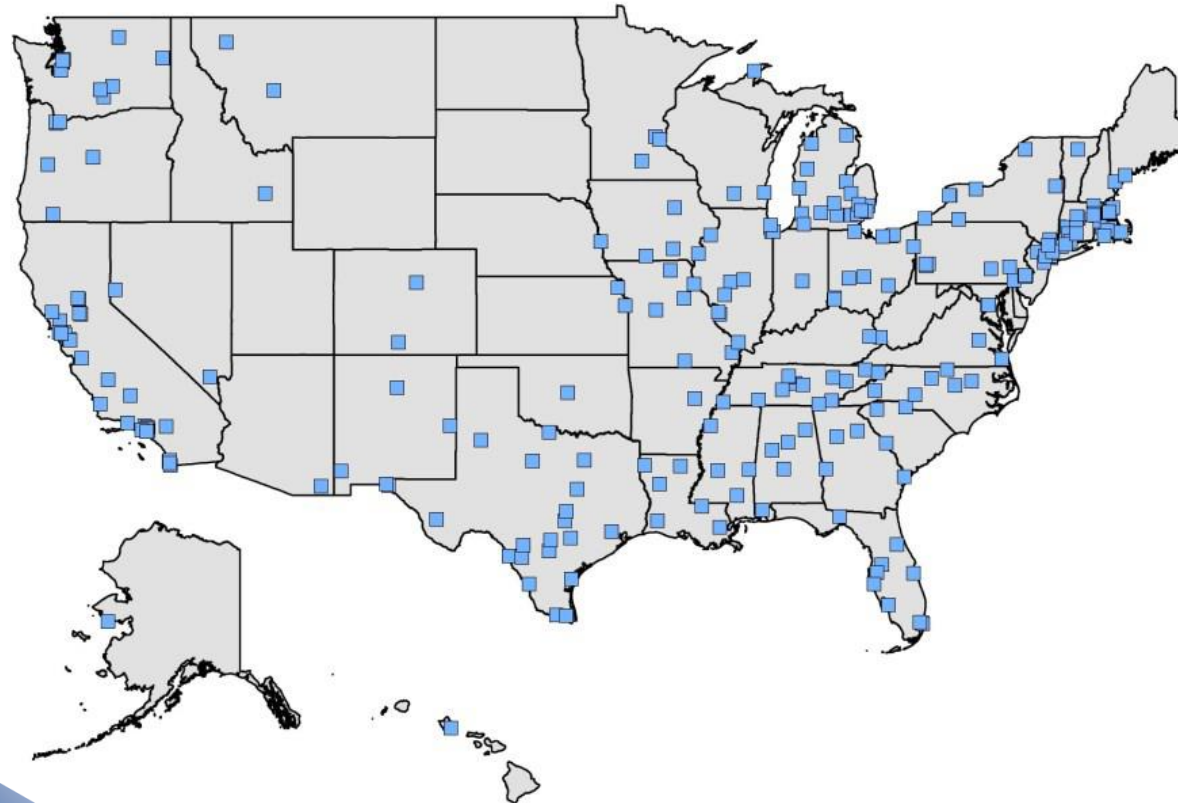
- HAs will also benefit from a **reduction of building damage** caused by smoking, and residents and PHAs both gain from seeing a reduction in injuries, deaths, and property damage from fires caused by prohibited tobacco products.



# Public Housing Primary Care Health Centers

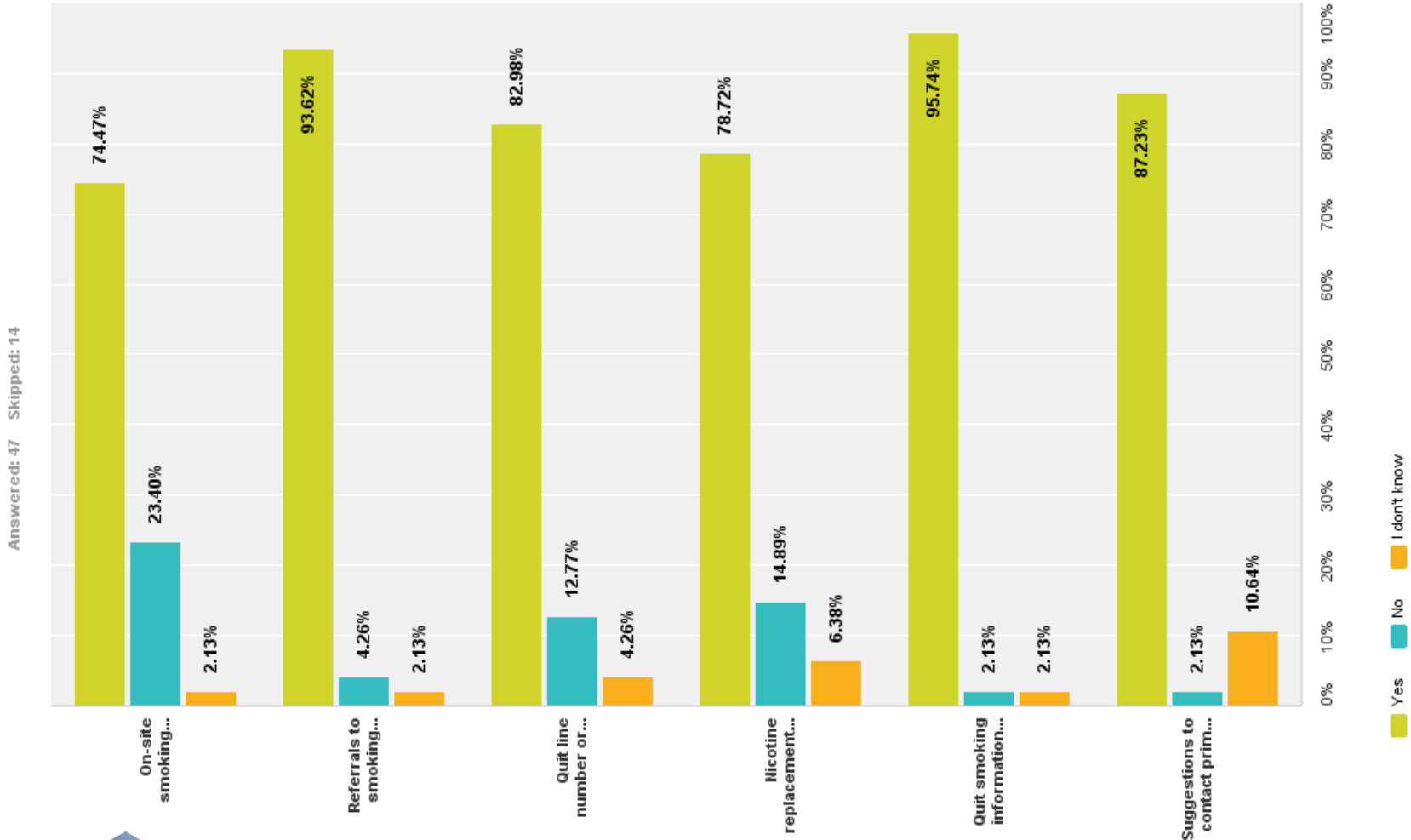


Health Centers In or Immediately Accessible to Public Housing



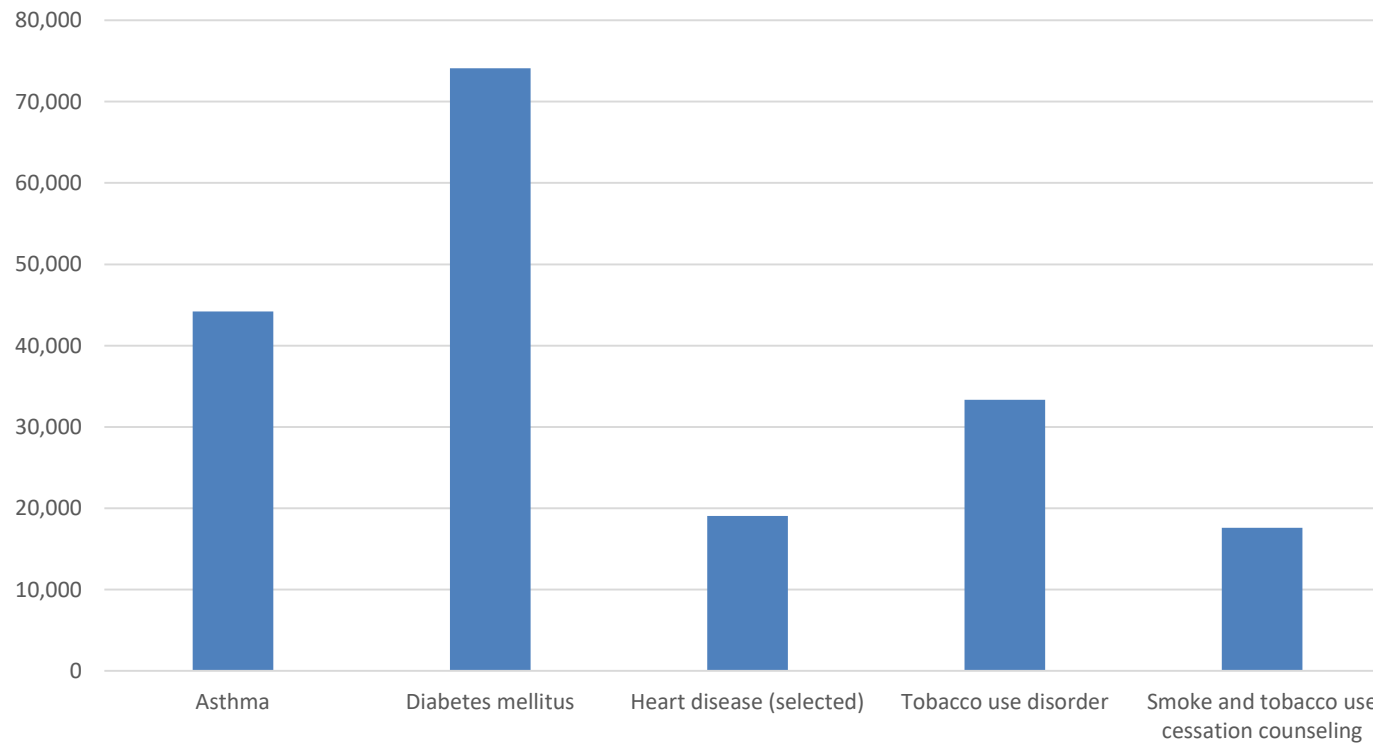
# Tobacco Cessation Support Strategies

Q45 Please check all of the smoking cessation support activities you offer.



# 2018 UDS Tobacco Data

Patients with Tobacco-Related Illnesses/ Health Conditions Exacerbated by Secondhand Smoke and Tobacco Use in PHPCs, 2018





# NCHPH Activities on Smoke-Free Public Housing

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Publications:  
Fact Sheets and  
Briefs

Webinars

Learning  
Collaborative

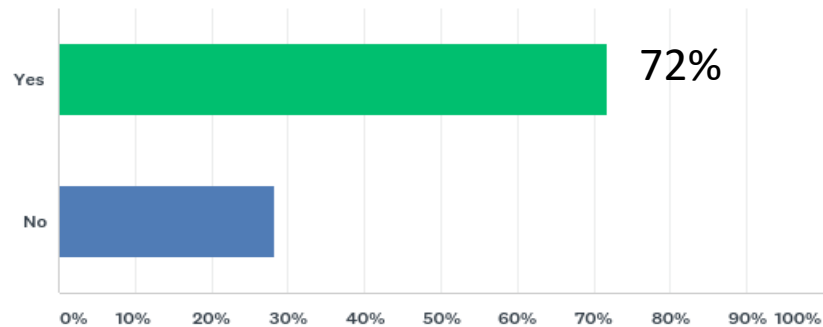
National  
Training  
Symposium

Widget

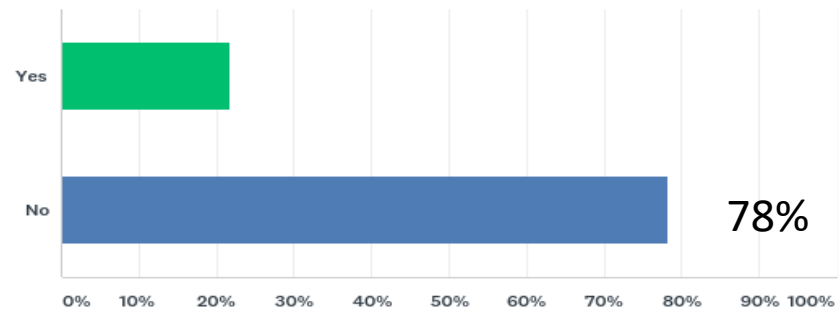
Collaborations

# Collaboration between Health Centers and Public Housing Authorities

Q4 Are you familiar with a new HUD rule prohibiting lit tobacco in all living units, outdoor areas (25 feet from the housing) and indoor common areas in public housing?



Q5 Are you collaborating with your PHA to implement a smoke-free policy?



Source: NCHPH 2016 Needs Assessment

# Daughters of Charity Health Center, New Orleans, LA

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- Staff Training:
  - Behavioral health specialists – PCPs and PCCs
- HA and HC Agreements:
  - Handouts and meetings





## Hampton Roads Community Health Center Portsmouth, VA

- Long Standing Collaborations with PHA
- Clinical Site located on PH premises
- Educational materials
- Newsletters
- **Challenges:**
  - Man power
  - Smoking cessation treatment



# Smoking Cessation Resources

[\*Tips From Former Smokers\*<sup>®</sup>](#)

[US Department of Housing and Urban Development](#)

[National Center for Health in Public Housing](#)

[UCSF Smoking Cessation Leadership Center](#)

[American Lung Association](#)

[American Cancer Society](#)

[North American Quitline Consortium](#)

# NCHPH Smoking Cessation Resources

## NCHPH.ORG, website:

- Abstracts, Best Practices, Factsheets
- Smoke-free Widget-Links to partners' information
- List of Community Health Centers
- List of Primary Care Associations
- Maps of Health Centers and PHAs
- Webinars and Training Symposia
- Health Center Locator: BPHC.HRSA.GOV
- Smoking Cessation Learning Collaborative—Program Year July 2020 – June 2021



## [NCHPH Smoking Resources](https://nchph.org/smoking-cessation-resources/)

<https://nchph.org/smoking-cessation-resources/>



NORTH AMERICAN  
**QUITLINE**  
CONSORTIUM

*PROMOTING EVIDENCE BASED QUITLINE SERVICES  
ACROSS DIVERSE COMMUNITIES IN NORTH AMERICA*



**HUD's Smoke-Free Public  
Housing Rule**  
*Information & Resources*



Building Public-Private  
Partnerships.



Learn more about  
electronic health  
records (EHRs) and  
quitlines.



Resources for Quitlines  
Partnering with  
Medicaid.



Stay current on *new  
cigarette warning label*  
developments.





- Project Echo
- Included participants from 6 states: California, Florida, Kentucky, New York, Pennsylvania, South Carolina
- Participants included staff from: Health Centers, Public Housing Agencies, Quitlines and State DPHs
- Format: Didactic, Case Studies, Discussion
- Report: Due June 2020
- Over 20 sessions available on YouTube.



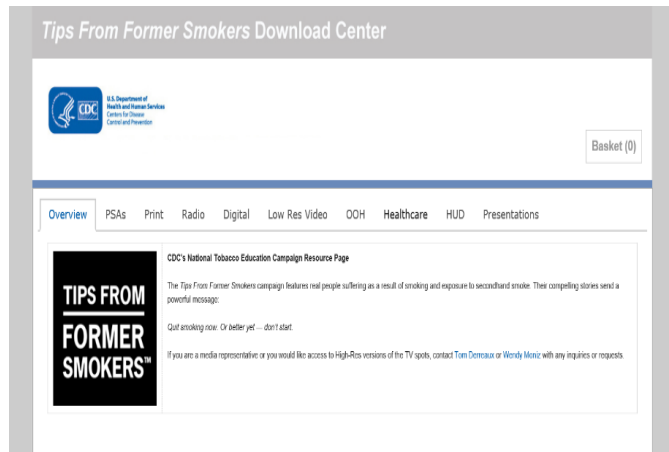
## [Project ECHO SFPH: Helping Smokers Quit](https://www.youtube.com/channel/UCZJkiYd7njqOYoFz_VyUa9Q/videos?reload=9)

[https://www.youtube.com/channel/UCZJkiYd7njqOYoFz\\_VyUa9Q/videos?reload=9](https://www.youtube.com/channel/UCZJkiYd7njqOYoFz_VyUa9Q/videos?reload=9)

# CDC Tips Campaign

## Download Center

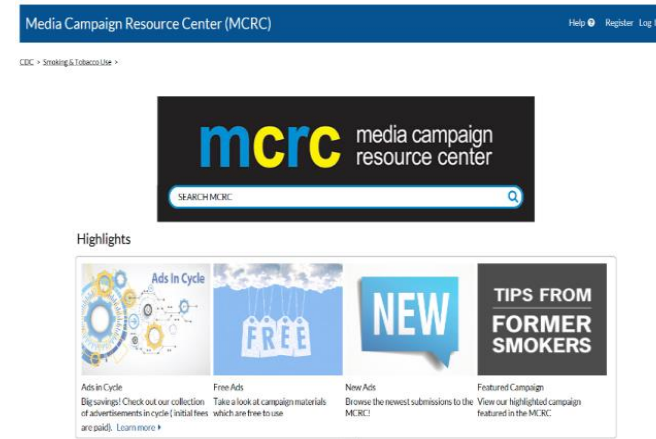
Free materials including low-resolution TV ads; radio, digital, print, and out-of-home ads; and public service announcements



[www.plowsharegroup.com/cdctips](http://www.plowsharegroup.com/cdctips)

## Media Campaign Resource Center

Broadcast-quality *Tips* ads and other tobacco countermarketing ads for paid campaigns



[www.cdc.gov/tobacco/MCRC](http://www.cdc.gov/tobacco/MCRC)

# Rebecca's Tip

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A TIP FROM A  
**FORMER  
SMOKER™**

# The Oral Health Impact: Tobacco, Marijuana, and Vaping Patients in Public Housing

Candace Owen, MPH, MS, RDH

NNOHA Education Director

February 21, 2020

# About NNOHA

- Founded in 1991 by FQHC Dental Directors who identified a need for peer-to-peer networking, collaboration, research, and support
- Membership now includes more than 3,500 dentists, dental hygienists, supporters, and partners



# The Oral Cavity is a Window to the Body

- Mouth serves as a portal of entry
- When oral tissues are compromised, can be a source of disease that does not stop at the mouth
- Increased evidence showing oral health impact on systemic health and vice versa

# What's the Evidence?

- Healthy People 2020 recognizes the impact of oral health to general health
- 2000 Surgeon General's Report: Oral Health in America: **“The control of existing oral infections is clearly of intrinsic importance and a necessary precaution to prevent systemic complications.”**
- 2003 US Health and Human Services *National Call to Action to Promote Oral Health* discusses the burden of oral diseases on social, emotional, and physical health



# Tobacco and Oral Health

- Periodontal disease
  - Bone loss, tooth mobility, tooth loss
  - Impact on systemic health
- Vasoconstriction
- Staining of teeth and tongue
- Dulled sense of taste/smell
- Oral cancer
- Dry mouth
- Dental caries



# Marijuana Smoking and Oral Health

## **Oral Health Impact**

- Periodontal disease
- Dry mouth
- Dental caries
- Oral cancer
- Oral lesions

## **Implications for Dental Appointments**

- Anxiety
- Paranoia
- Increased heart rate
- Anesthesia with epinephrine should be avoided

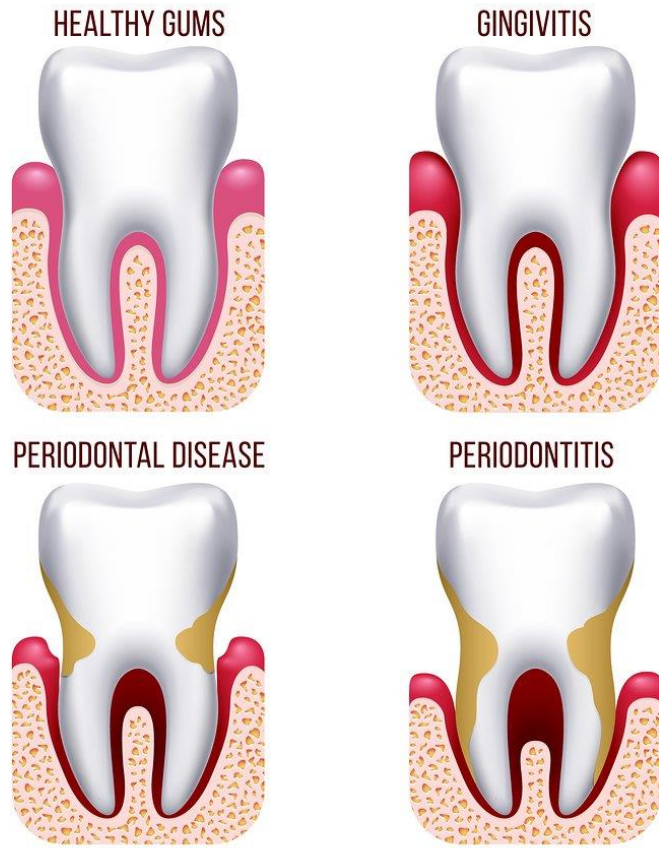
# Studies suggest a direct relationship between marijuana and periodontal disease

Shariff JA, Ahluwalia KP, Papapanou PN. Relationship Between Frequent Recreational Cannabis (Marijuana and Hashish) Use and Periodontitis in Adults in the United States: National Health and Nutrition Examination Survey 2011 to 2012. *J Periodontol* 2017;88(3):273-80.

Chisini LA, Cademartori MG, Francia A, et al. Is the use of Cannabis associated with periodontitis? A systematic review and meta-analysis. *J Periodontal Res* 2019.

Thomson W, Poulton R, Broadbent JM, et al. Cannabis smoking and periodontal disease among young adults. *JAMA* 2008;299(5):525-31.

# Periodontal Status and General Health



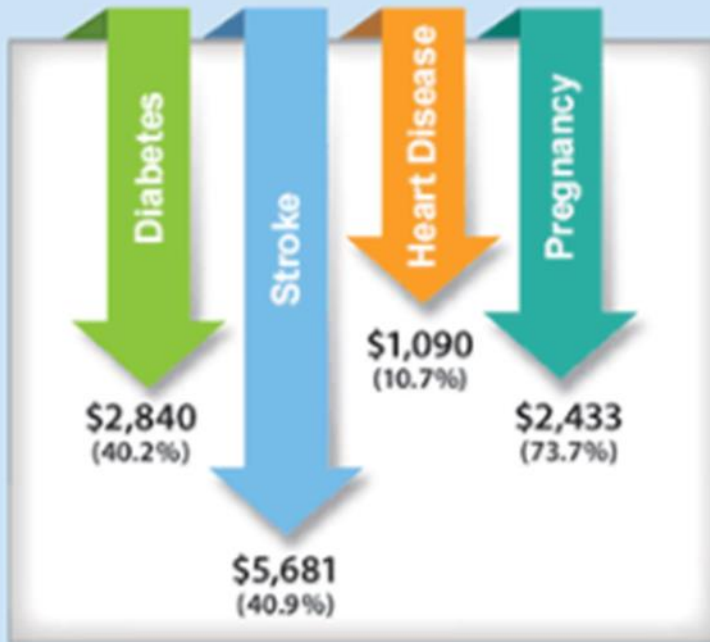
<https://www.interdent.com/gentle-dental/resources/gum-disease-guide/>

- Diabetes
- Rheumatoid arthritis
- Alzheimer's disease
- Aspiration pneumonia
- Cardiovascular disease
- Stroke
- Colorectal cancer

# United Concordia Study

- Individuals with chronic diseases or are pregnant who are receiving periodontal treatment have reduced medical costs than those who receive no periodontal treatment.
- Individuals with chronic diseases who are receiving periodontal treatment have reduced hospital admissions than those who receive no periodontal treatment. *(Jeffcoat 2014)*

## Treating Gum Disease Means Lower Annual Medical Costs



Significant annual cost savings are possible when individuals with certain chronic diseases (diabetes, cerebral vascular disease, or coronary heart disease), or who were pregnant, received dental treatment for their gum disease, after accounting for the effect of diabetes.

## Treating Gum Disease Reduces Hospital Admissions



Significant decreases in annual hospitalizations are possible when individuals with certain chronic diseases received dental treatment for their gum disease, after accounting for the effect of diabetes.

# E-Cigarettes

- Vaping, e-cigs, vape pens, electronic nicotine delivery systems (ENDS)
- *Centers for Disease Control and Prevention (CDC):* E-cigarettes are not safe for youth, young adults, pregnant women, or adults who do not currently use tobacco products



# EVALI

- E-cigarette, or vaping, product use-associated lung injury (EVALI)
- Vitamin E acetate strongly linked to EVALI
- As of January 14, 2020, there were 2,668 hospitalized EVALI cases or deaths reported to the CDC
- Symptoms include chest pain, fever, rapid heartbeat, shallow breathing, shortness of breath, cough, nausea

[https://www.cdc.gov/tobacco/basic\\_information/e-cigarettes/index.htm](https://www.cdc.gov/tobacco/basic_information/e-cigarettes/index.htm)



# E-Cigarettes and Oral Health

- American Dental Association (2019) – Statement of Vaping
  - “Vaping is not a safe alternative to cigarettes or other tobacco products. When it comes to your teeth and gums, vaping could be just as dangerous as cigarette smoking.”
  - E-Cigarettes added to ADA’s policy on tobacco use, tobacco prevention and regulation materials
  - <https://www.ada.org/en/press-room/news-releases/2019-archives/october/american-dental-association-statement-on-vaping>

# E-Cigarettes and Oral Health

- Long-term oral health effects are still undergoing scientific review
- E-cigarettes contain fine particles of toxic chemicals and metals which may lead to conditions like respiratory disease, heart disease, and cancer.
- Nicotine is a vasoconstrictor – decreased healing response, periodontal disease, dry mouth, dental caries

# Increasing Access to Oral Health Care

- Interprofessional collaboration
  - Oral Health Core Clinical Competency Domains for primary care providers  
<https://www.nnoha.org/programs-initiatives/ipohccc/>
  - Increase oral health access and early intervention by engaging primary care providers in oral health activities (i.e. screenings, risk assessments, referral)
- Expansion of dental services
  - On-site expansion
  - Off-site expansion: mobile/portable dental programs, school-based health programs, hospital-based care, teledentistry, contracting with outside dental providers
  - <https://www.nnoha.org/ohi-toolkit/option-2-currently-offers-on-site-dental-services/>

# Resources

- Centers for Disease Control and Prevention – E-cigarettes  
[https://www.cdc.gov/tobacco/basic\\_information/for-health-care-providers/index.html](https://www.cdc.gov/tobacco/basic_information/for-health-care-providers/index.html)
- American Dental Association – Tobacco Cessation  
<https://www.ada.org/en/member-center/oral-health-topics/tobacco-use-and-cessation>
- Stanford Tobacco Prevention Toolkit  
<https://med.stanford.edu/tobaccopreventiontoolkit.html>
- Association of State and Territorial Health Officials – E-Cigarettes Resources  
<https://www.astho.org/Prevention/Tobacco/E-Cigarettes/Library/>
- NNOHA Periodontal Disease and Diabetes Factsheet  
[http://www.nnoha.org/nnoha-content/uploads/2019/04/NHCHC-NNOHA-FAQ\\_final\\_2019.pdf](http://www.nnoha.org/nnoha-content/uploads/2019/04/NHCHC-NNOHA-FAQ_final_2019.pdf)

# Contact Us!



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ZUFALL  
HEALTH

COMMUNITY  
HEALTH  
CENTERS

# Zufall Health Center

Sam Wakim DMD, MPH

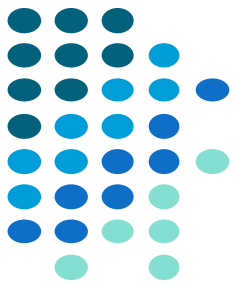
2/21/2020

# Zufall Health Center

- Founded in 1990 as the Dover Free Clinic
- Started with volunteer physicians
- Became Federally Qualified Health Center in Dec 2004
- Renamed *Zufall Health Center* in 2006, in honor of our founders, Bob and Kay Zufall
- Will celebrate 30 years in 2020
- PCMH Level III



Founders Dr. Robert Zufall  
and Mrs. Kathryn Zufall



# Our Patients



**In 2018, served 39,071 patients with 142,621 visits**

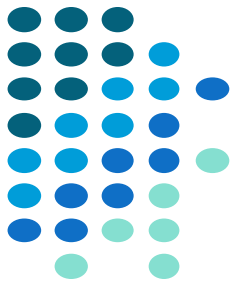
- 86% of patients below 200% of FPL
- 47% of patients uninsured
- 67% of patients Hispanic
- 49% of patients best served in a language other than English
- Serving special populations of Homeless, Public Housing, Farmworkers

Public Housing		
Year	Visit Count	Patient Count
2015	3935	936
2016	5108	1312
2017	6528	1600
2018	7074	1664
2019	6914	1608





# Smoking Rates



National – 14%

NJ residents - 13.7%

NJ Pregnant Women - 3.8%

NJ High School Students – 4.7%

\*National Health Interview Survey (NHIS), CDC/NCHS

\*Healthy NJ 2020, NJDOH

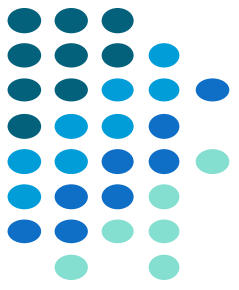
\*2014 New Jersey Youth Tobacco Survey

ZUFALL  
HEALTH

COMMUNITY  
HEALTH  
CENTERS

County	2011	2017	2018	2019
Atlantic	23%	17%	19%	19%
Bergen	15%	12%	13%	13%
Burlington	18%	13%	14%	14%
Camden	20%	17%	17%	17%
Cape May	22%	14%	15%	15%
Cumberland	25%	20%	17%	17%
Essex	17%	15%	15%	15%
Gloucester	21%	16%	16%	16%
Hudson	20%	16%	16%	16%
Hunterdon	15%	11%	13%	13%
Mercer	15%	14%	13%	13%
Middlesex	15%	11%	12%	12%
Monmouth	17%	13%	14%	14%
Morris	14%	11%	12%	12%
Ocean	20%	15%	14%	14%
Passaic	17%	14%	16%	16%
Salem	24%	18%	17%	17%
Somerset	12%	10%	11%	11%
Sussex	20%	13%	14%	14%
Union	17%	13%	13%	13%
Warren	22%	16%	16%	16%
<b>NEW JERSEY</b>	<b>17%</b>	<b>14%</b>	14%	14%

County Health Rankings 2011-2019



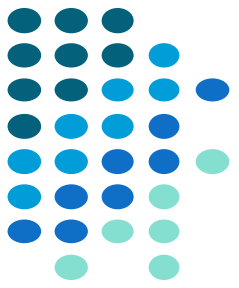
# New Generation of Tobacco Addiction

- 1 in 5 US high school students and 1 in 20 US middle school students use e-cigarettes (NYTS 2018)
- From 2017 to 2018 there was 78% increase in US high school students who use e-cigarettes
- 2016 9.6% of NJ High School students were e-cigarette users
- In 2015: Of the young adults ages 18 – 24 that used e-cigarettes, 40% were NOT current smokers
- In 2017: 2.8% of US adults were e-cigarette users
- In 2015: 58.8% of adults who were e-cigarettes users were also current cigarette smokers (**dual users**)



SOURCE: CDC, 2019.

# E-Cigarettes Policy Changes



## NEW JERSEY

2010 - NJ Clean Indoor Air Act  
Addendum to include e-cigarettes

2017 - NJ age of sale became 21

2019 - NJ parks and beaches became  
tobacco free – including vaping

## OTHER CHANGES

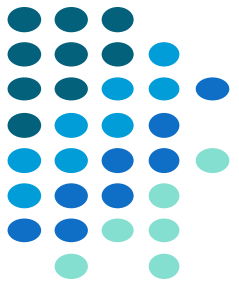
2016 - FDA regulations process  
began

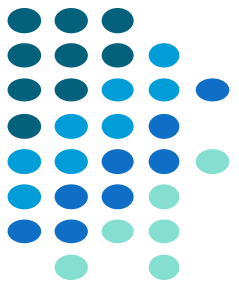
2018 - JUUL removed flavored pods  
from retail stores

2019 - States and Federal  
government is looking into regulating  
flavors and products

# Zufall's Approach

- Provider Training
- Collaborative Partnerships
- Patient Education & Referrals



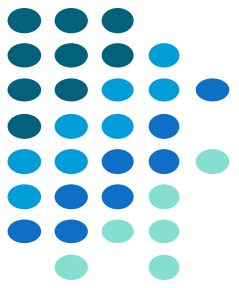


# NJ Children's Oral Health Program

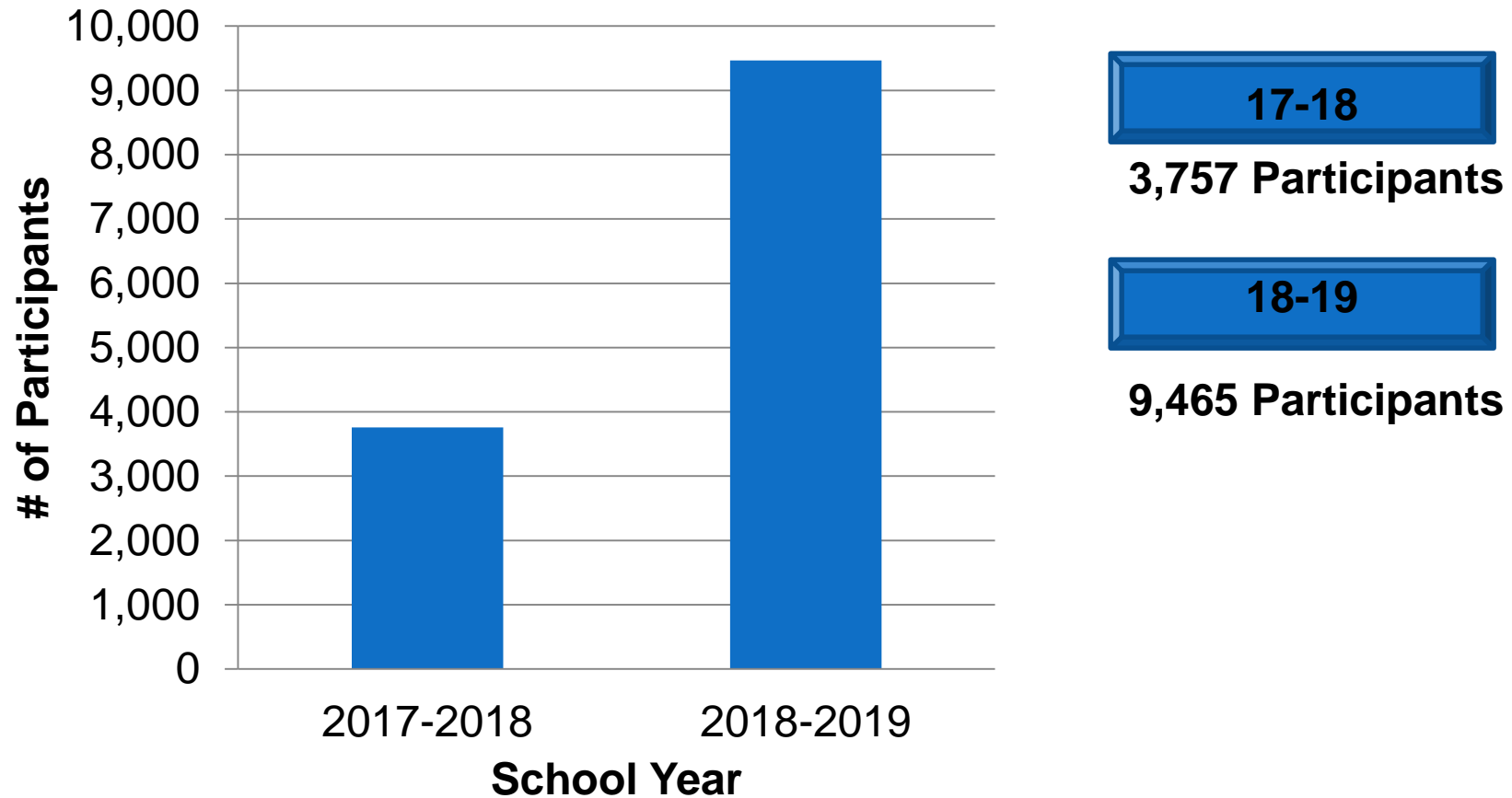
- Tobacco/Vape Education:
  - ❖ School Grades 5-12
  - ❖ Health Care Professionals & Associations
  - ❖ Administration, School Nurses, Parents
  - ❖ Community Programs
- 12 Counties in NJ



# COHP Data



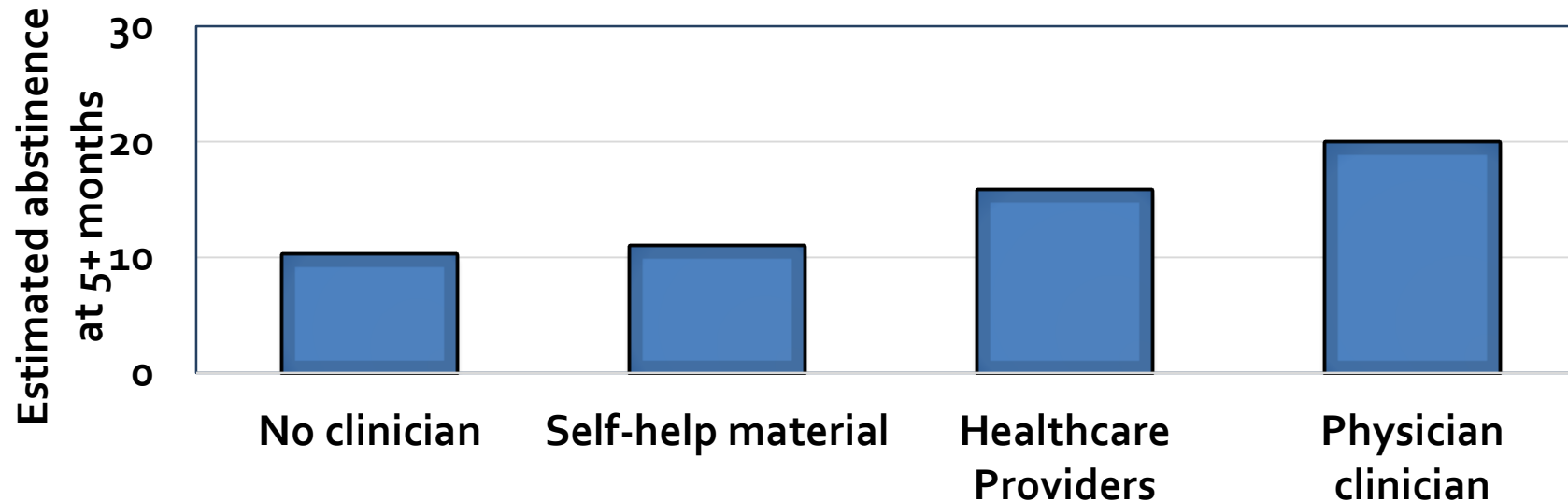
## Tobacco/Vape Education



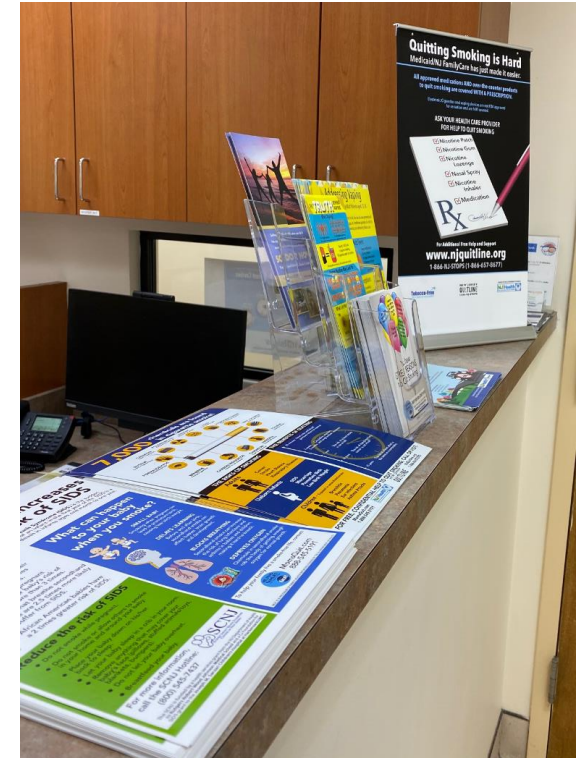


# Impact of Clinician Intervention

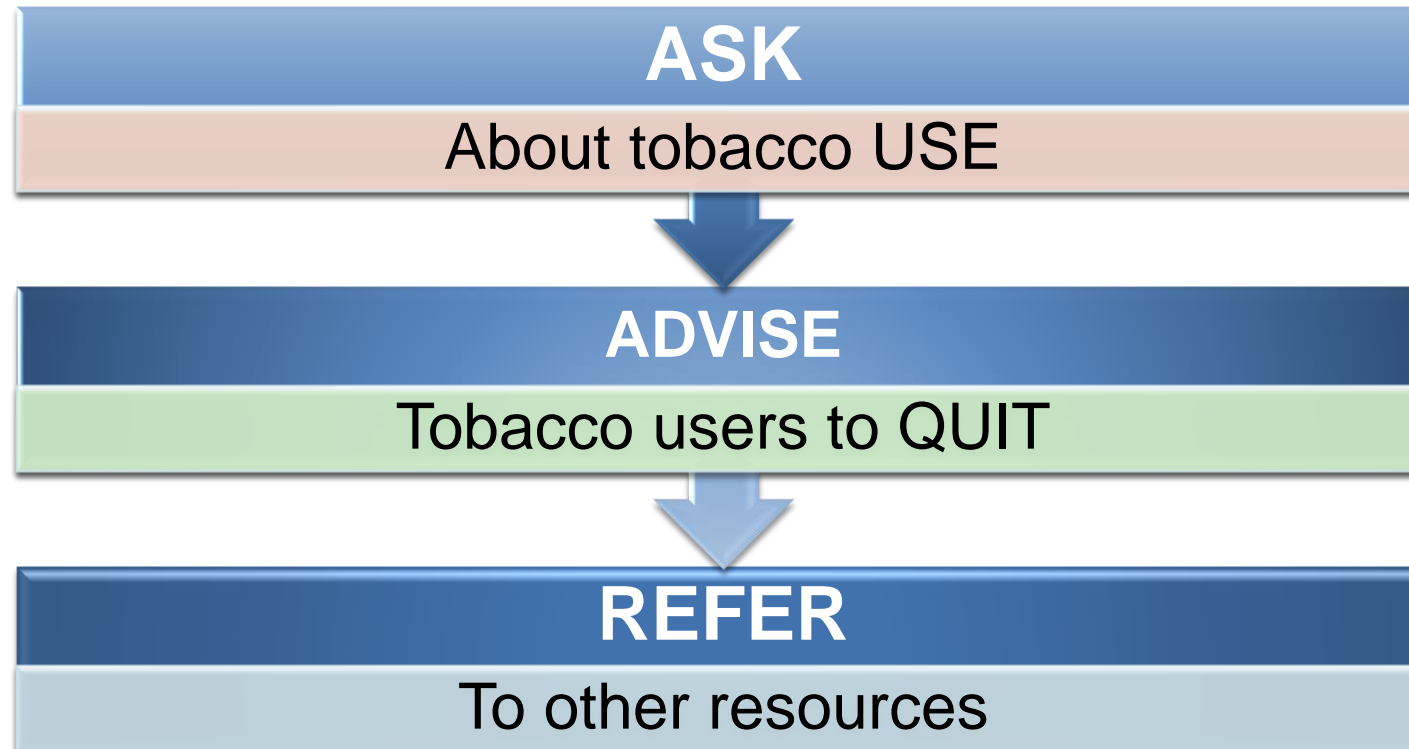
Compared to patients who receive no assistance from a physician, patients who receive assistance are between **1 1/2** and **2 times** more likely to quit successfully for 5 months or more.



Fiore et al. (2008). *Treating Tobacco Use and Dependence: 2008 Update. Clinical Practice Guideline*. Rockville, MD: USDHHS, PHS, May 2008



# CDC Brief Counseling: **Ask, Advise, Refer**



# ASK (1 Minute)

Purpose: To ask

**Ask** about the type and amount of tobacco used.

*"Explain your use of tobacco in any form."*

*"Tell Me about your tobacco use."*

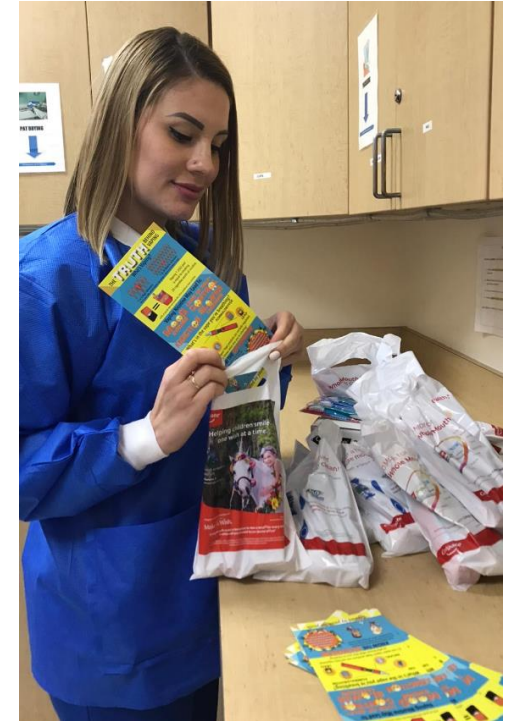
*"Describe your tobacco use in the past."*

**If identified as a current or former smoker**

*"How many cigarettes per day do you smoke?"*

*"How many cigars per day do you smoke?"*

*"How often do you puff on your e-cigarette?"*



# Advise (1 Minute)

## Clear, strong, personalized advice to quit

**Clear:** Simply state the need to cut down and quit

*"My best advice for you and your family is for you to quit smoking."*

**Strong:** State the necessity for action

*"As your dentist, I need you to know that quitting smoking is one of the most important decisions you can make to reduce your oral cancer risk."*

**Personalized:** Tie tobacco use to current symptoms and health concerns

*"While you are here about your gum disease, I need you to know that smoking affects your oral health."*

# Refer (1 Minute)

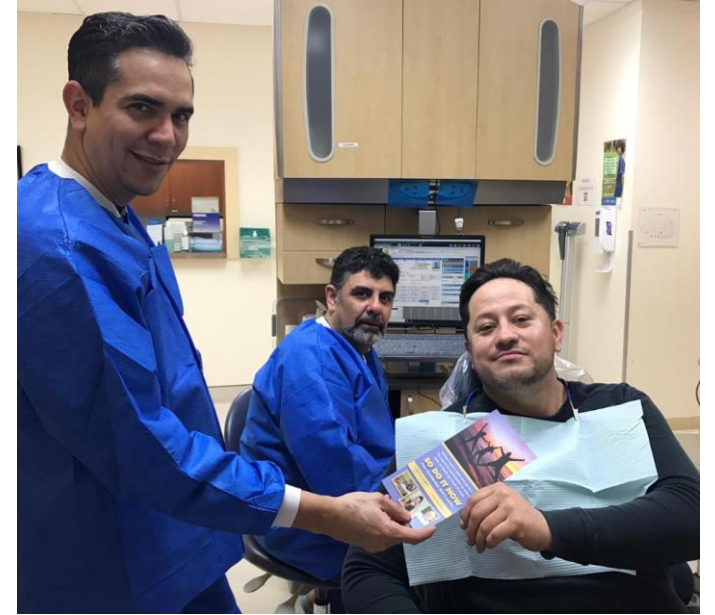
## Refer to smoking cessation resources:

- Mom's Quit Connection for Families
- NJ Quitline
- NJ Quit Centers

## Scripting Example:

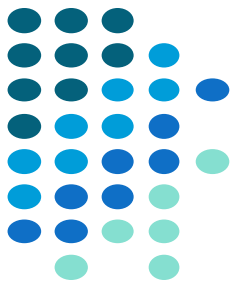
*"New Jersey has free services to help you quit smoking; Mom's Quit Connection for Families, the NJ Quitline and local quit centers."*

*"Using support services can more than **double** your chances of quitting."*



# Zufall's Partners and Resources in NJ

- NJ Quitline
- NJ Quit Centers
- Mom's Quit Connection For Families



NEW JERSEY  
**QUITLINE**<sup>SM</sup>

**Tobacco-Free**  
FOR A HEALTHY NEW JERSEY



# Fax To Quit

Clients do not have to be ready to quit, MQC accepts clients in **any stage** of readiness.



*Quit smoking with support during and after pregnancy*

2500 McClellan Avenue, Suite 250  
Pennsauken, New Jersey 08109  
856.665.6000 / 856.665.7711 fax  
888.545.5191 toll-free  
www.snjpc.org

## Fax To

Please fax this form to MQC, then place original on patient's chart.

Date: \_\_\_\_\_  
To: **Mom's Quit Connection  
Smoking Cessation Support Counselor**  
Phone: 856-665-6000 Fax: 856-665-7711  
From: \_\_\_\_\_  
**Provider Name**  
\_\_\_\_\_  
**Hospital/Office Name**  
\_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
# Pages including cover: \_\_\_\_\_

**This section to be completed by client**

### Consent

I have been informed about Mom's Quit Connection, a FREE smoking cessation service for pregnant women and new mothers. I give permission for an MQC counselor to call me and tell me more about the program. I understand that by having someone contact me, I am under no obligation to sign up for services. I understand that this form will be faxed to the MQC office.

### Please Print:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Street Address \_\_\_\_\_ Apt. No. \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone Number (\_\_\_\_\_) \_\_\_\_\_ e-mail \_\_\_\_\_  
Preferred call times \_\_\_\_\_  
Signature: \_\_\_\_\_

### Stage of Readiness

Please check what best describes you:

- Ready to quit
- Willing to talk about quitting
- Want more information:
  - About quitting
  - About second hand smoke

### Are You Pregnant?

- Yes Due Date: \_\_\_\_\_
- No

### Do you now have or have you ever had diabetes?

- Yes
- No

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# Provider Follow-Up

MQC generates and sends to individual providers a report documenting the status of each patient they referred to the program.

2500 McClellan Avenue, Suite 250  
Pennsauken, New Jersey 08109

856.665.6000  
856.665.2875 fax  
888.545.5191 toll free

 **Quit Mom's Connection**  
*Quit smoking with support during and after pregnancy*

**STATUS REPORT**

Date: \_\_\_\_\_

To: \_\_\_\_\_ From: \_\_\_\_\_

Thank you for your referral to Mom's Quit Connection.  
Below lists \_\_\_\_\_ 's current enrollment status.

Has yet to enroll onto MQC services  
Phone attempts made on \_\_\_\_\_  
Letter with information sent on \_\_\_\_\_

Attends MQC Cessation counseling sessions

<input type="checkbox"/>	Quit smoking on
<input type="checkbox"/>	Decreased smoking
<input type="checkbox"/>	Maintained smoking (working on decreasing)
<input type="checkbox"/>	Using Nicotine Replacement Therapy

Last seen on \_\_\_\_\_

Case closed on \_\_\_\_\_ due to:

<input type="checkbox"/>	Quit and no further services needed
<input type="checkbox"/>	Moved out of MQC service area
<input type="checkbox"/>	Lost to follow-up

You make a difference! Your continued support and encouragement at every visit influences your patients' decision to quit. Pregnant women are more motivated to stop smoking now than at any other time in their lives. Keep up the good work.

If you have any questions or comments regarding this client's status, please do not hesitate to call. (856) 665-6000

A Southern New Jersey Perinatal Cooperative program funded by the NJ State Department of Health & Senior Services Comprehensive Tobacco Control Program.





# FAX Form New Jersey QuitLine

The provider is asked to only fax refer patients to the NJ Quitline who are in a stage where they are at least thinking about making a quit attempt in the near future.

**NEW JERSEY QUITLINE**  
I-866-NJ-STOPS

New Jersey Quitline  
FAX REFERRAL FORM  
Fax Number: (800) 483-3114

FAX SENT DATE:  /  /

Provider Information:

CLINIC NAME  CLINIC ZIP CODE

HEALTH CARE PROVIDER

CONTACT NAME

FAX NUMBER  PHONE NUMBER

I AM A HIPAA COVERED ENTITY (PLEASE CHECK ONE)  
YES  NO  DONT KNOW

Patient Information:

PATIENT NAME  DATE OF BIRTH  GENDER  MALE  FEMALE

ADDRESS  CITY  ZIP CODE

PRIMARY PHONE NUMBER  HM  WK  CELL  SECONDARY PHONE NUMBER  HM  WK  CELL

LANGUAGE PREFERENCE (PLEASE CHECK ONE)  
ENGLISH  SPANISH  OTHER

By participating in this program I understand that outcome information may be shared with my provider for purposes of my treatment.

I am ready to quit tobacco and request the New Jersey Quitline contact me to help me with my quit plan.  
Verbal Consent

I DO NOT give my permission to the New Jersey Quitline to leave a message when contacting me.  
Verbal Consent \*\* By not initiating, you are giving your permission for the quitline to leave a message.

PATIENT SIGNATURE:  DATE:  /  /   
Verbal Consent obtained by:

The New Jersey Quitline will call you. Please check the BEST 3-hour time frame for them to reach you. **NOTE: The Quitline is open 7 days a week; call attempts over a weekend may be made at times other than during this 3-hour time frame.**

6AM - 9AM  9AM - 12PM  12PM - 3PM  3PM - 6PM  6PM - 9PM

WITHIN THIS 3-HOUR TIME FRAME, PLEASE CONTACT ME AT (CHECK ONE):  Primary #  Secondary #

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# Feedback NJ Quitline

From: GFI FaxMaker Page: 1/3 Date: 9/4/2019 12:40:05 PM (ATLENTPFAX2)



## Participant Outcome Report

Your Clinic recently referred a patient via the New Jersey Quitline Fax Referral Program. This form describes the type of service the patient received through the New Jersey Quitline. Please place this in the patient's file.

### Clinic Information:

Clinic Name: CEED

Clinic Phone Number: (609) 465-1047

Clinic Fax Number: (609) 463-0511

### Patient Information:

Participant Name:

Participant Address:

Participant Primary Phone Number:

Participant Date of Birth:

### Outcomes:

Status: **Unreachable**

Program:

NRT:

Contact Date if Contacted:

**Sep 03, 2019**

Planned Quit Date (If accepted services):

**No Plan Quit Date**

#### *Definitions of Outcomes Listed Above*

##### Status

- **Accepted Services:** Participant was reached and accepted service.
- **Declined Services:** Participant was reached and declined service.
- **Unreachable:** Attempts were made to contact the participant during their best time, but the quitline was unable to reach the participant.

##### Program

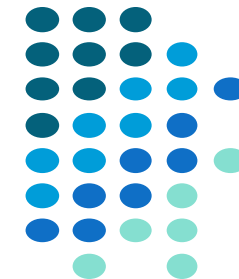
- **General Questions:** Participant inquired about the quitline and its services, but did not opt for an intervention or materials.
- **Materials Only:** Participant requested printed materials only.
- **One-Call:** Participant received a single call intervention with a Quit Coach.
- **Multi-Call:** Participant received an intervention with a Quit Coach and accepted additional proactive calls.
- **Web Only:** Participant enrolled in web-based cessation services.
- **Individual Services:** Participants may select any or all of the following: 2-week supply of NRT, Email program, Text-messaging program, Materials.

##### NRT

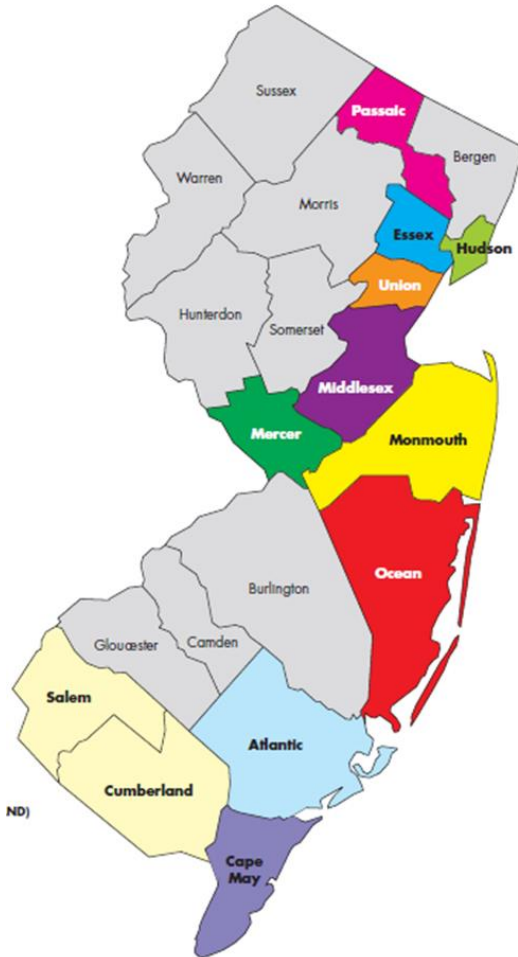
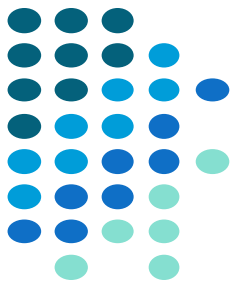
- Participant was screened and dosed for the above noted Nicotine Replacement Therapy (patch, gum, or lozenge).

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# NJ Quit Centers



11 NJ Quit Centers

To locate local Quit Center visit:

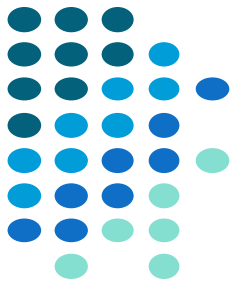
[www.tobaccofreenj.com](http://www.tobaccofreenj.com)

Individual and group counseling

Provide residents with the resources to stop or reduce their use of tobacco products

Enrolled clients of the Quit Center may qualify for free NRT as part of their treatment plan

# Assessment captured in eCW



▼ CRA 11-20

Did you have any cavities in the past year?

Do you eat a lot of sugary snacks, drink sugary drinks, or sports drinks between meals?

Do you use drugs, tobacco products or drink alcohol?

Does your mouth feel dry all the time?

Do you wear braces or a retainer?

Do you use Fluoride toothpaste, rinses, or other products to protect your teeth?

Do you use any other gels or rinses that your doctor gave you to protect your teeth?


(6-11)How many sugary/sweets beverages does your child drink

**Answer**

No

Yes

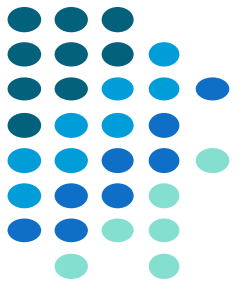
N/A

**Comment** 

Smokes 1 pack/day

OK Cancel

# Self Management Goal Recorded



Question & Answer

▼ PLWHA / ADULT CRA

Do you use Fluoride toothpaste, rinses, or other products to protect your teeth?

Do you eat a lot of sugary snacks, drink sugary drinks, or sports drinks between meals?

Did you have any cavities in the past year?

Do you have a dentist?

Special health care needs, chemo/radiation therapy, eating disorders, take medications that reduce salivary flow?

Do you use drugs, tobacco products or drink alcohol?

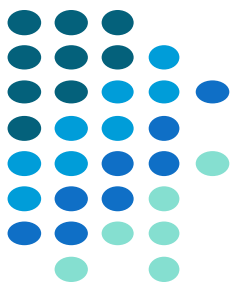
▼ Goals

Select a goal or multiple goals

- Less sugar
- Less soda / juices
- Eat healthy
- Dont share food with baby
- Fluoride supplement
- Rinse with mouthwash
- Go to the dentist
- See physician regularly
- Use mouth guard
- Use xylitol
- No tobacco products
- Drink Fluoride Water
- No drugs
- No alcohol
- Use sunscreen

OK Cancel

# Becomes part of the note ...



## Subjective:

### Chief Complaint(s): ▼

- Recall/Exam

### HPI: ▼

### Current Medication:

#### Taking

- Ibuprofen 800 MG Tablet 1 tablet with food or milk as needed Orally Three times a day
- Metformin 1 tab Oral
- Medication List reviewed and reconciled with the patient

### Medical History:

- high blood pressure
- diabetes mellitus

### Dental History:

#### PLWHA / ADULT CRA

- Do you use Fluoride toothpaste, rinses, or other products to protect your teeth? Yes
- Do you eat a lot of sugary snacks, drink sugary drinks, or sports drinks between meals? Yes
- Did you have any cavities in the past year? Yes
- Do you have a dentist? Yes - Zufall Dental
- Special health care needs, chemo/radiation therapy, eating disorders, take medications that reduce salivary flow? No
- Do you use drugs, tobacco products or drink alcohol? Yes Smokes 1 pack/day

#### Goals

- Select a goal or multiple goals No tobacco products

### Allergies/Intolerance:

- Penicillin G Benzathine
- eggs

# Coded with D1320



**TOOTH CHART** Action - Full Tooth Chart

**ACTION - SELECTED TEETH**

- Primary
- Permanent
- Missing
- Not Missing

**MOVEMENTS**

- Mesial - +
- Occlusal - +
- Labial - +
- Mesial Tip - +

**ENTRY STATUS**

- Treatment Plan TP
- Completed C
- Existing E
- Referred R
- Other O

**TREATMENT DATE**

02/20/2020

**ICD**

Code  Description

**SURFACE**

L B/F M D O/I

Class V L B/F

**QUICK BUTTONS**

PC AC

MO MOD O DO OL OB MODL MODB

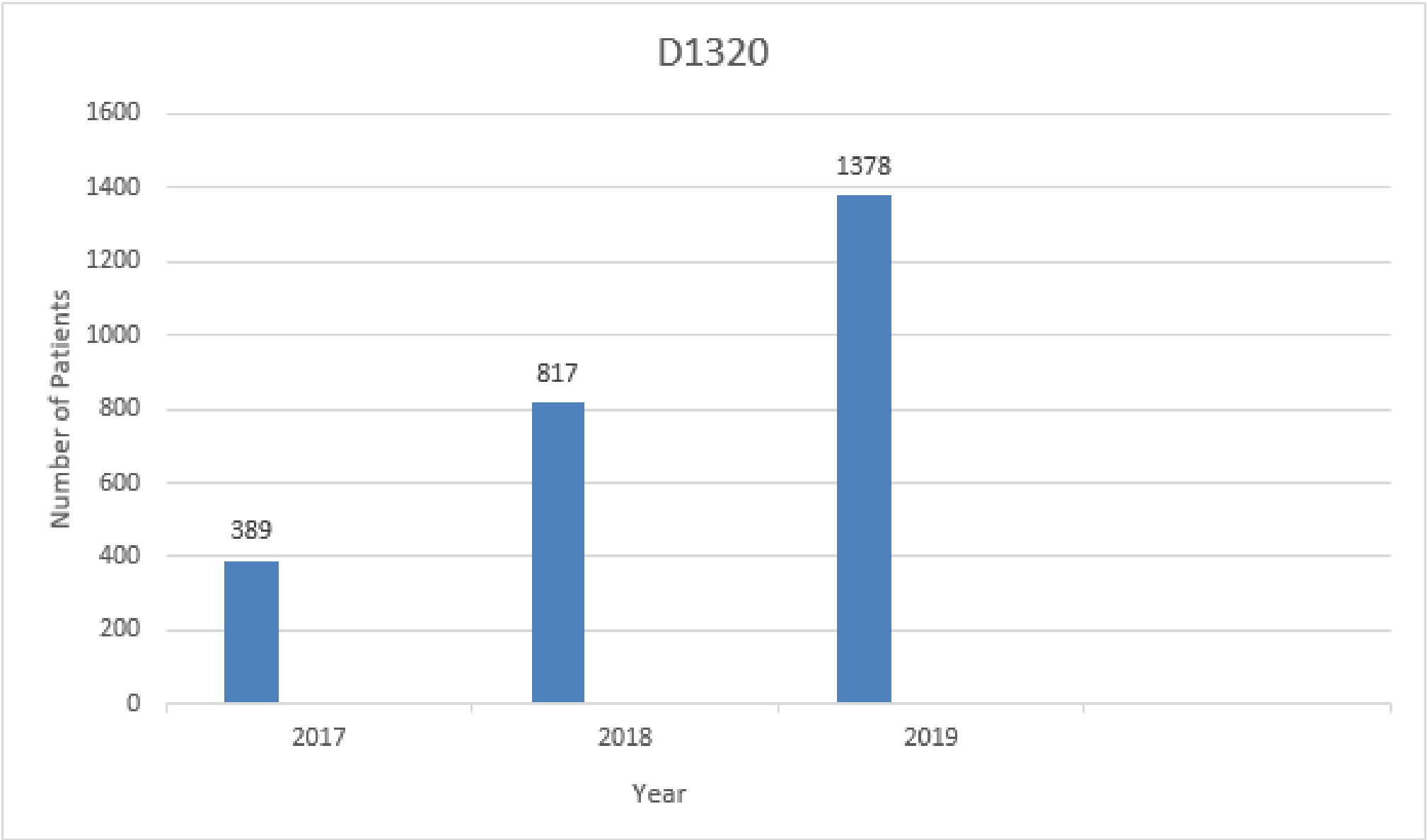
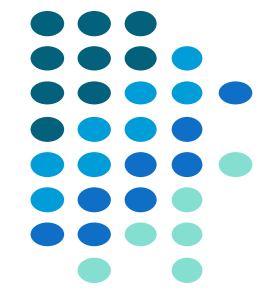
**PROCEDURES**

Watch AdultExam Peds EandC Procedures Perio Peds BMI - HPV

NP Adult prophy	NP Debridement Uninsured
Limited Debridement Insured	NP Adult inflammation
Adult Cleaning Visit	Adult Recall w/o Cavity
Adult Recall w Cavity	Adult Prophyl
Treatment Plan Complete	High Risk
Med. Risk	Low Risk
Desensitizing Medication	NP Adult Exam

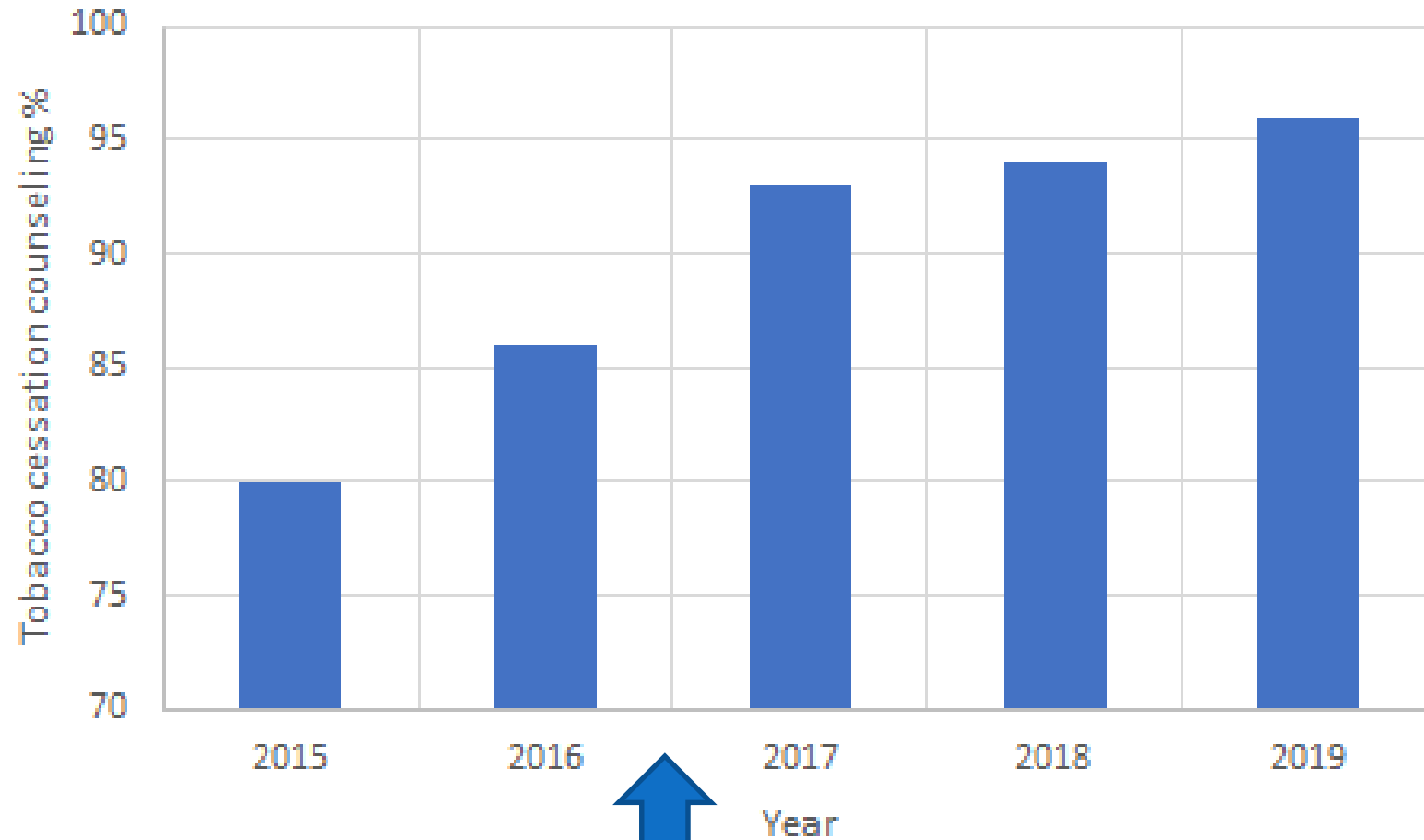
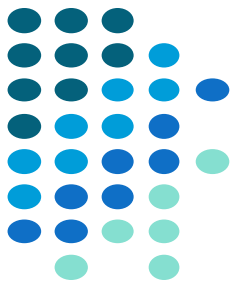
PROCEDURE LIST

		Provider	Resource	Status	Date	Priority	Tooth	Surface	Procedure	Prior-Auth
<input type="checkbox"/>	-	Wakim, Sam, DDS	Wakim, Sam, DDS	C	02/20/2020	No priority	Full Mouth		[NC001] Dummy Code: New caries lesion	
<input type="checkbox"/>		Wakim, Sam, DDS	Wakim, Sam, DDS	C	02/20/2020	No priority	Full Mouth		[D0120] PERIODIC ORAL EXAMINATION	
<input type="checkbox"/>		Wakim, Sam, DDS	Wakim, Sam, DDS	C	02/20/2020	No priority	Full Mouth		[D0274] BITEWINGS - FOUR FILMS	
<input type="checkbox"/>		Wakim, Sam, DDS	Wakim, Sam, DDS	C	02/20/2020	No priority	Full Mouth		[D1110] PROPHYLAXIS - ADULT	
<input type="checkbox"/>		Wakim, Sam, DDS	Wakim, Sam, DDS	C	02/20/2020	No priority	8		[D9910] APPLICATION DESENZT MEDICAMENT	
<input type="checkbox"/>		Wakim, Sam, DDS	Wakim, Sam, DDS	C	02/20/2020	No priority	Full Mouth		[D0603] caries risk assessment and documentatio...	
<input type="checkbox"/>		Wakim, Sam, DDS	Wakim, Sam, DDS	C	02/20/2020	No priority	Full Mouth		[SM001] Dummy code: Self Management Goals R...	
<input type="checkbox"/>		Wakim, Sam, DDS	Wakim, Sam, DDS	C	02/20/2020	No priority	Full Mouth		[D1330] ORAL HYGIENE INSTRUCTIONS	
<input type="checkbox"/>		Wakim, Sam, DDS	Wakim, Sam, DDS	C	02/20/2020	No priority	Full Mouth		[D1320] TOBACCO CNSL CNTRL	
<input type="checkbox"/>		Wakim, Sam, DDS	Wakim, Sam, DDS	C	02/20/2020	No priority	Full Mouth		[D9993] Dental Case Management - motivational i...	

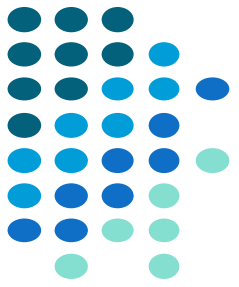




# UDS Tobacco Cessation Counseling



# Additional Cessation Programs



- Free texting (Teens)
  - Truth– Text "QUIT" to (202) 899-7550.
    - Specifically to quit vaping
  - Smoke free Teen – Text QUIT to 47848
    - To quit smoking



- Free Online
  - Become and Ex – [www.becomeanex.org](http://www.becomeanex.org)
    - Smoking and vaping



- Free Apps
  - QuitSTART
    - smoking



# Q&A

If you would like to ask the presenter a question, please submit it through the questions box on your control panel.

If you are dialed in through your telephone and would like to verbally ask the presenter a question, use the “raise hand” icon on your control panel and your line will be unmuted.

- 
- Symposium Registration, Call for Abstracts and Posters, and sponsorship opportunities are now available for our 2020 Symposium.
  - When? June 18 – 19, 2020
  - For more information visit our website at [nchph.org](http://nchph.org)



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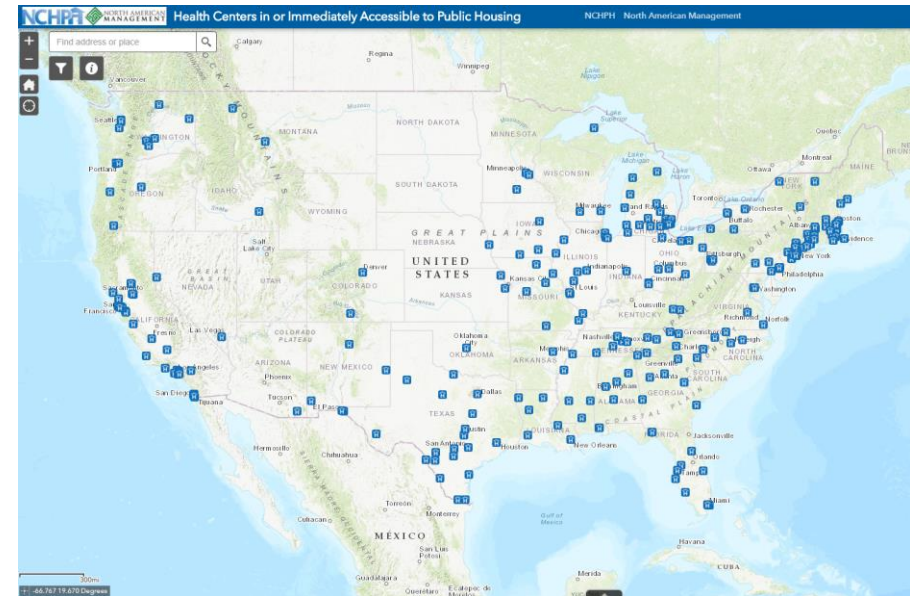
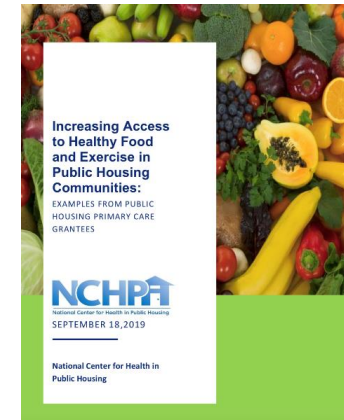


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- One-on-One





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Please contact our team for Training and Technical Support at [info@nchph.org](mailto:info@nchph.org) or 703-812-8822

# THANK YOU!

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