

Pioneers of Prevention: Implementation of a Nurse Practitioner–Led Smoking Cessation Program

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Smoking is the single most preventable cause of death and illness worldwide. Although smoking causes about one-third of cancers and accounts for 30% of cancer deaths, there are no specific, required competencies for smoking cessation in the medical oncology curriculum. Nurse practitioners (NPs) serve critical roles in health care as drivers for quality improvement through the implementation of evidence-based practice. Therefore, an NP-led smoking cessation program was initiated using the American Society of Clinical Oncology's Tobacco Cessation Guide for Oncology Providers. Following education, pharmacotherapy, and nicotine supplement interventions, nine patients quit smoking, resulting in a \$511,200 cost avoidance.

AT A GLANCE

- Advanced practice nurses can transform health-care delivery systems through the implementation of evidence-based practice.
- Nurses and other healthcare leaders can advocate for implementing NP primary care clinics focused on disease prevention and screening.
- Mastering healthcare business acumen is essential for all nurse leaders.

KEYWORDS

tobacco cessation; nurse practitioner; quality improvement; smoking

DIGITAL OBJECT IDENTIFIER

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Cancer is the second leading cause of death in the United States (Centers for Disease Control and Prevention, 2023). In the United States, the leading preventable cause of disability, disease, and death is tobacco use (Krist et al., 2021), which is responsible for 30% of all cancer deaths (American Cancer Society, 2022). Despite this, medical residency or undergraduate nursing curricula do not provide structured training on the adverse effects of tobacco use on health or strategies to mitigate those effects (Rojewski et al., 2019). Evidence-based guidelines for smoking cessation have been set forth by the American Society of Clinical Oncology (ASCO, 2012) and the National Comprehensive Cancer Network (2023). Therefore, to mitigate the risks associated with tobacco use, a project team was developed to implement a nurse practitioner (NP)–led smoking cessation program based on the 5 A's of the ASCO Tobacco Cessation Guide for Oncology Providers within a community cancer center, with the goal of decreasing tobacco use among patients with cancer who were undergoing active cancer treatments and reported tobacco use.

Background and Literature Review

Healthcare Provider Tobacco Screening and Cessation Support

The World Health Organization (2022) reported that, as of 2020, about 23% of the U.S. population uses tobacco. The relationship between tobacco use and cancer requires consistent surveillance and individualized management approaches (National Comprehensive Cancer Network, 2023). Oncology care clinicians manage patients throughout the cancer care continuum and are responsible for assessing and managing tobacco use in their patients (Krist et al., 2021). The Centers for Medicare and Medicaid Services (2017) instituted the electronic health record Meaningful Use criteria through the Medicare and Medicaid Programs (2015) to improve the quality and coordination of care and increase patient engagement. Organizations that implement the Meaningful Use criteria, which include completing tobacco use screening and providing cessation support, can participate in the electronic health record incentive program. Therefore, most organizations have implemented the Meaningful Use criteria to aid in smoking cessation efforts.