

THE INITIATIVE

While all clinics in the Allina Medical Clinic system were encouraged to adopt the AHCPR Clinical Practice Guideline for Smoking Cessation, the study focused on 20 primary care clinics. Since Allina has no internal research department, RWJF funds supported outside research assistance (obtained through a subcontract with the University of Wisconsin's Center for Tobacco Research and Intervention), the costs of exit surveys, salaries for trainers conducting in-service training of physicians, and salaries of Allina's survey personnel. Allina received additional support from its own Foundation (Allina Foundation), and from SmithKline Beecham, McNeil, and Glaxo Wellcome, all pharmaceutical companies.

The study, a group randomized trial, established 10 intervention and 10 control-group clinics. One intervention clinic later dropped out. Intervention and control clinics had similar patient demographics, clinic volumes, and provider types. The research sought to: (1) examine the means by which full implementation of the AHCPR guideline can be achieved in a large health care organization; and (2) assess the impact of such implementation on tobacco use.

Allina's Project QUIT (Quality Improvement in Tobacco Control) outlined four study questions:

- What changes need to be made to a health care delivery system in order to implement successful clinician-based smoking cessation strategies?
- To what degree can a health care system expect to implement the AHCPR guideline in a large group practice?
- What level of reduction in tobacco use can be expected if the guideline were to be fully implemented?
- What are the costs associated with full implementation of the guideline?

The intervention took place over a three-month period. The researchers gathered data by three means: patient exit surveys, chart audits, and analysis of administrative data.

- **Patient exit surveys.** Allina studied the quit rate per clinic, testing for statistical differences between intervention and control clinics. Before randomization, approximately 600 patients from each of the 20 clinics filled out brief exit surveys ascertaining their tobacco-use status and the "advice-to-quit" information they had received from providers. About three months after guideline implementation, approximately 1,200 patients from each clinic completed a survey. A third survey was mailed six months after the intervention to patients who previously had identified themselves as smokers. (The mail survey focused only on these smokers primarily because of cost constraints.)
- **Chart audits.** Allina abstracted information from 50 patient records per clinic to determine the degree to which clinics documented the AHCPR smoking cessation intervention steps.