Measuring the success and tracking for the CF-5A's Intervention is critical so that delivery is maximized, consistent, effective and sustainable. This occurs by having clinic leadership and staff identify and address any delivery gaps to improve the intervention's flow and quality of the service delivered. The CF-5A's model was created so it could be adapted for diverse clinic practices. For example, 5A's is intended to support measures of success that can be integrated with a clinic's preexisting systems. As a clinic begins their CF-5A's Intervention for smoking cessation it is recommended that the measures chosen to gauge success are strategically planned for what best fits the practice's current quality improvement procedures. We recommend that the clinic's leader or appropriate staff select measures found to be most useful to the practice.

Below are suggested measures to monitor CF-5A's Intervention success and outcomes. They can be merged with either a preexisting smoking cessation program to improve a system that already works, or they can serve as new system measures found to be compatible and effective with best clinic practices. To determine and measure the CF-5A's success and help identify service delivery gaps, clinics can use the data collected and quantify (as the numerator) the number of:

- Smokers who took the CF-5A's Intervention assessment
- Follow-up appointments scheduled to discuss smoking
- Prescriptions for NRT or cessation meds
- Referrals made to cessation counseling

? Then compare (as the denominator) to the number of all smokers seen for that same period.

There are also contextual measures for success that a clinic could consider integrating into their procedures, such as:

- A reporting system of smokers to Medicare, i.e., billing for CF-5A's smoking cessation counseling and treatment.
- Written or noted observations, and feedback regarding satisfaction/challenges from patients, providers, and staff.
- Time required for patients to use the assessment tool.
- Difficulties encountered (wifi, language, literacy, clinic flow, elderly, technology inability).

Once measures are identified they are to be applied/calculated during the intervention's beginning phase and on a monthly or quarterly basis. From these outcome measures, challenges and successes can be identified and addressed by each clinic.

If your practice has a board or stakeholder committee, measures can be presented to or worked on by the group, which can maximize the CF-5A's Intervention service delivery,
improve buy-in and demonstrate transparency.

Needs an actual tool(?) ... Troubleshooting section of wherever system can break down? (pending 4/26 per Jason’s review)

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