

Evaluation Rubric





















Evaluation Rubric					
Level	Item(s)	Successful organizations			
В	1.1 – 2.5	☐ Establishes identity			
С	2.6 – 2.7	☐ Establishes connection to community			
В	3.1 – 3.5	☐ Establishes data collection capacity			
В	4.1	 □ Provides robust narrative description of intervention points in patient care where tobacco use is assessed and documented. □ Clearly articulates types of professionals performing assessment. □ Describes workflow elements constraining / facilitating assessment. 			
В	4.2	 □ Utilizes robust tobacco history narrative in treatment planning. □ Stores information in easily accessible / readily visible location. □ Minimizes limitation in authorized personnel. 			
В	4.3	☐ Routinely ascertains and documents use of "non-cigarette" forms.			
С	4.4	 Uses qualitative or quantitative measures to assess and document severity of tobacco dependence. 			
С	4.5	□ Expands tobacco use history.□ Utilizes historical data in treatment planning.			
В	5.1	 □ Develops / documents a tobacco treatment plan specific to context of care, including: □ Cognitive management (counseling) targets □ Patient / family education needs □ Pharmacotherapy recommendations □ Assessment of adherence □ Follow-up plan 			
В	5.2	 Uses an evidence-based clinical practice guideline to guide pharmacotherapy decision-making. Uses an evidence-based clinical practice guideline to guide formulary decisions <i>OR</i> has evidence-based rationale for deviation. 			
В	5.3	 □ Integrates tobacco treatment into disease-specific care pathway. □ Provides written example. 			
С	5.4	☐ Treats tobacco pharmacotherapy as a quality metric; tracks utilization and corrects deviation.			



Evaluation Rubric (cont)					
Level	Item(s)	Successful organizations			
С	5.5	 □ Actively ensures tobacco-specific follow-up / continuity post-discharge. □ Documents follow-up instruction within discharge planning. 			
В	6.1	 Requires appropriate professional qualifications for coordinators of tobacco treatment Has at least one certified (or certification-eligible) tobacco treatment specialist on staff. Promotes certification of providers. 			
В	6.2	 Utilizes a clinical director of other supervisory personnel to provide program oversight and direction. Utilizes established mechanism for resolving uncertainties or clinical questions. 			
С	6.3	 Requires baseline training AND continuing education related to the treatment of tobacco dependence. 			
С	6.4	 Involves a variety of disciplines in care, AND employs an effective process for coordination of effort. 			
В	7.1	☐ Facilitates inter-staff communication across departments, locations, time.			
В	7.2	 Integrates tobacco dependence treatment services into community-based activities. Effectively delivers information about services to high-prevalence communities. Aligns messages with the cultural context of the catchment community. 			
С	7.3	 Employs effective patient-facing communications (e.g. toll-free number, web-site, text, electronic health record, etc.) Articulates the overlapping roles of the various contact points. 			
С	7.4	 □ Tracks community contact. □ Utilizes information in decision making. □ Maintains privacy and security of protected health information. 			
С	7.5	☐ Promotes its therapeutic successes.			



Evaluation Rubric (cont)					
Level	Item(s)	Successful organizations			
B/C	8.1	 Effectively describes an area of expertise AND provides written commitment to continued growth in the area. OR Effectively describes three areas of particular expertise AND provides written commitment to continued growth in these areas. 			
С	8.2	 Provides a detailed description of QI initiative to be undertaken over 3-year period, including timelines, personnel and anticipated outcomes. 			