**STOP/INTREPID Teleconference**: Wednesday, January 8, 2025, 1:00-2:00 PM EST

[**General meeting link**](https://camh.webex.com/camh/j.php?MTID=mc4605326350fc582c07876c20645d918)

**Next Teleconference: Wednesday, February 5, 2025 @ 1-2 PM EST.**

**Teleconference Summary**

1. [**STOP Program Updates:**](#_STOP_Program_updates:) **Tobacco interventions for Geriatric Patients Q&A – January 27th,2025 1-2 PM** [click here](https://edc.camhx.ca/redcap/surveys/?s=E7FRWAR3JX4KAC38) to register. Please ensure your physical inventory matches your portal inventory.
2. [**TEACH Updates:**](#_TEACH_updates:)Teach Needs Assessment on Listserv.
3. [**STOP on the Net Updates**](#_STOP_on_the)**:** Program optimization happening early next year. Changes to NRT kits offered, andopportunity for patients to complete an assessment to determine suitability for varenicline and buproprion.
4. [**STOP with AHACs Updates:**](#_STOP_with_AHACs:) STOP with AHACs is looking to collaborate with organizations offering the STOP with AHACs program to co-create and participate in an evaluation of the program at these sites. Contact **Aamir.Sholapur@camh.ca** for more information.
5. **TECCT1D3 Study:** Currently recruiting 60 young adults to participate in a research study to test a new virtual model of care for type-1 diabetes and mental health concerns. Email [TECC.T1D@camh.ca](mailto:TECC.T1D@camh.ca)

# Land Acknowledgment:

* Identify the land you are joining us from today ([**https://www.whose.land/en/**](https://www.whose.land/en/))

# STOP Program updates:

* NRT Orders
  + As always, please ensure current inventory matches your physical stock.
* **Tobacco Interventions for Geriatric Clients Q&A with Dr. Aviva Rostas, January 27th from 1 to 2 p.m.:** 
  + **Learning Objective:** To build capacity for supporting geriatric patients and LTCH residents with tobacco/nicotine cessation
  + To register, please [click here](https://edc.camhx.ca/redcap/surveys/?s=E7FRWAR3JX4KAC38)

# STOP Program Processes – Your Feedback:

# *We are interested in learning more about how your patients become aware of the STOP program at your organization. Below is a summary of your responses from our discussion:*

* + ***How do your patients typically become aware of the program. How is it offered?*** 
    - Primary Care Providers
      * STOP promotional material (e.g. pamphlets, booklets, posters, TV screen) is available at reception, in waiting/exam rooms, bathrooms, etc.
      * Practitioners are prompted to update clients’ smoking statuses and/or tobacco and nicotine use on a regular basis – they are referred to the STOP Program depending on their status
      * Many STOP sites also advertise internally and revisit their organization’s STOP promotional plan annually
    - Referrals
      * Most clients are referred by their PCPs or go through self-referral
      * Clients also hear through word-of-mouth (e.g. family, friends, other clients)
    - Internet/Social Media
      * Clients find the STOP Program website or the STOP Program comes up when they search up quit smoking resources/support
  + ***Once the patient is made aware, how do you get them into the program? Are there any resources we can develop to better support this process?***
    - One-on-one appointments are scheduled by reception or directly by the practitioner so they can complete STOP enrollment/registration with clients
      * Some practitioners also follow up with the clients after the initial appointment
    - Some additional resources that could be helpful are:
      * Business cards with QR codes
      * Flyers/posters that can be handed out to clients
      * These could include a summary of the STOP Program, emphasis on available NRT options (and number of weeks allotted), counselling support, etc.
      * A list of all STOP providers in Ontario and their contact info (so providers can refer clients directly to another site/provider if needed), as well as a list of local organizations that accept non-rostered patients
      * Resources for counselling
  + ***How else can we (CAMH) better support you in the above process?***
* *Email* [*STOP.Program@camh.ca*](mailto:STOP.Program@camh.ca) *if you have more ideas/thoughts!*

# TEACH updates:

[Self-study courses](https://teach.camhx.ca/moodle/)

* TEACH offers a selection of additional modules focused on specific populations or topics (e.g., tobacco interventions with: youth and young adults; cannabis; cancer care settings)

**TEACH Needs Assessment for Educational Rounds and Listserv**

* Teach is interested in identifying topics of interest for learning about in the **2025-26 TEACH Educational Rounds** series. Additionally TEACH has some questions pertaining to the**TEACH Listserv**, to help inform ways to improve our community of practice efforts.
  + <https://edc.camhx.ca/redcap/surveys/?s=FCRNNLYYXAFJHFPL>

**For any questions about the above TEACH courses, workshops, and Educational Rounds, please reach out to** [**teach@camh.ca**](mailto:teach@camh.ca)

### Join T​EACH's Li​stserv​

The **TEACH Listserv** is a way for you to network and share information around cessation counselling. Join over 800 health care providers in sharing​​ and discussing current events, innovative research, and the latest changes in the health field!​​

If you are interested in subscribing, please have a read through of our [TEACH ​Listserv Guidelines](https://intrepidlab.ca/en/teach/PublishingImages/Pages/TEACH-Connect/TEACH%20CoP%20Listserv%20Guidelines.pdf).​

To subscribe, simply send an email from your preferred e-mail address to: [teach-request@info2.camh.net](mailto:teach-request@info2.camh.net?Subject=subscribe) and write 'subscribe' in the subject line of your e-mail.​

You will receive a message confirming your subscription, as well as instructions on how to post or unsubscribe - it's fast and easy!​​​

INTREPID updates:

* Visit our website to learn about INTREPID Lab updates: [www.intrepidlab.ca](http://www.intrepidlab.ca/)
  + To learn more about research studies that are currently recruiting new participants, visit this page: <https://www.nicotinedependenceclinic.com/en/Pages/Patient-Research.aspx>

# STOP on the Net (SOTN):

# Program Update – In an effort to expand our reach and connect more people to care, and based on analyses of the program, we have made the following changes to SOTN:

# Available NRT kits:

* + **Combination Kit:** Includes 6 boxes of NRT patches and 3 boxes of NRT gum **OR** lozenges
  + **NRT Patch Kit *(new)*:** Includes 6 boxes of NRT patches (*ideal for individuals who prefer not to use short-acting NRT)*
  + **Short-acting Kit *(new)***: includes 6 boxes of NRT gum **OR** 5 boxes of NRT lozenges *(only provided to individuals who are deemed ineligible to use NRT patches, or have experienced an adverse reaction or difficulty using the NRT patch)*
* *All NRT kits provided through STOP on the Net will include enough medication for* ***6 weeks of treatment.***
* Option to complete an assessment to help determine suitability for using prescription smoking cessation medications (varenicline and/or bupropion) which can be obtained through their healthcare provider, if participant has not quit smoking while using NRT.
* Option to enroll in a mobile phone program (E-Squared) for vaping cessation, for those who have quit smoking at 6-month follow-up and are now interested in quitting vaping
* 2 follow-up surveys conducted by STOP on the Net via email, phone and/or text message at 8 weeks and 6 months after joining the program.

# To join STOP on the Net, visit <https://intrepidlab.ca/en/stop/stop-on-the-net>

# PHU Advertising

* We are working with **Public Health Units** to help promote our **STOP on the Net Program** – we want to reach out to as many people who might benefit from this program as possible, and you know your clients best!
* CAMH is once again offering to reimburse up to **$1,000 total per Health Unit** between **October 1, 2024** and **March 1, 2025** for spending towards **SOTN promotional activities**
  + Eligible promotional activities include: radio advertising, social media campaigns (e.g., Facebook/Instagram, Twitter/X), promotional video development, website updates, bus shelters and public transit ads
    - If you would like to pursue a different promotional strategy than listed above, please connect with us
    - You are welcome to our poster and/or ads (sent via email on September 30) as a template for your promotional materials
    - Promotional materials must include:
      1. CAMH logo
      2. Funding acknowledgement statement: “**STOP on the Net is an initiative of the Smoking Treatment for Ontario Patients (STOP) Program, and is funded by the Ontario Ministry of Health**”
    - Please avoid using language that may reinforce stigma and public misconceptions about mental illness and addiction (e.g., labeling; guilt- or shame-based messaging), or imagery that depicts tobacco use. **Please Note:** we are currently in the process of making updates to the STOP on the Net program to optimize treatment offerings and increase access to supports for adults across Ontario. Therefore, **please do not include specific details around treatment offerings and length of treatment** as part of your advertisements.
  + **Promotion approvals:** All promotional materials must be reviewed by the STOP on the Net team before advertising publically – please send the final product (or script/mock up) to us and complete this table:

|  |  |
| --- | --- |
| **Type of ad (e.g., print, radio, website, video)** | **Do you give permission for CAMH to share this ad more widely for SOTN promotional purposes? Y/N** |
|  |  |

# STOP with AHACs:

# The STOP with AHACs Program has been operating in partnership with Aboriginal Health Access Centres and Indigenous-Led Health Organizations since 2014 to support smoking cessation initiatives in Indigenous Communities. Since its launch in 2014, the STOP with AHACs Program has seen over 4000 enrollments.

# The STOP team would like to collaborate with AHACs and Indigenous-Led Health Organizations and co-create an evaluation exploring the impact of the STOP with AHACs Program.

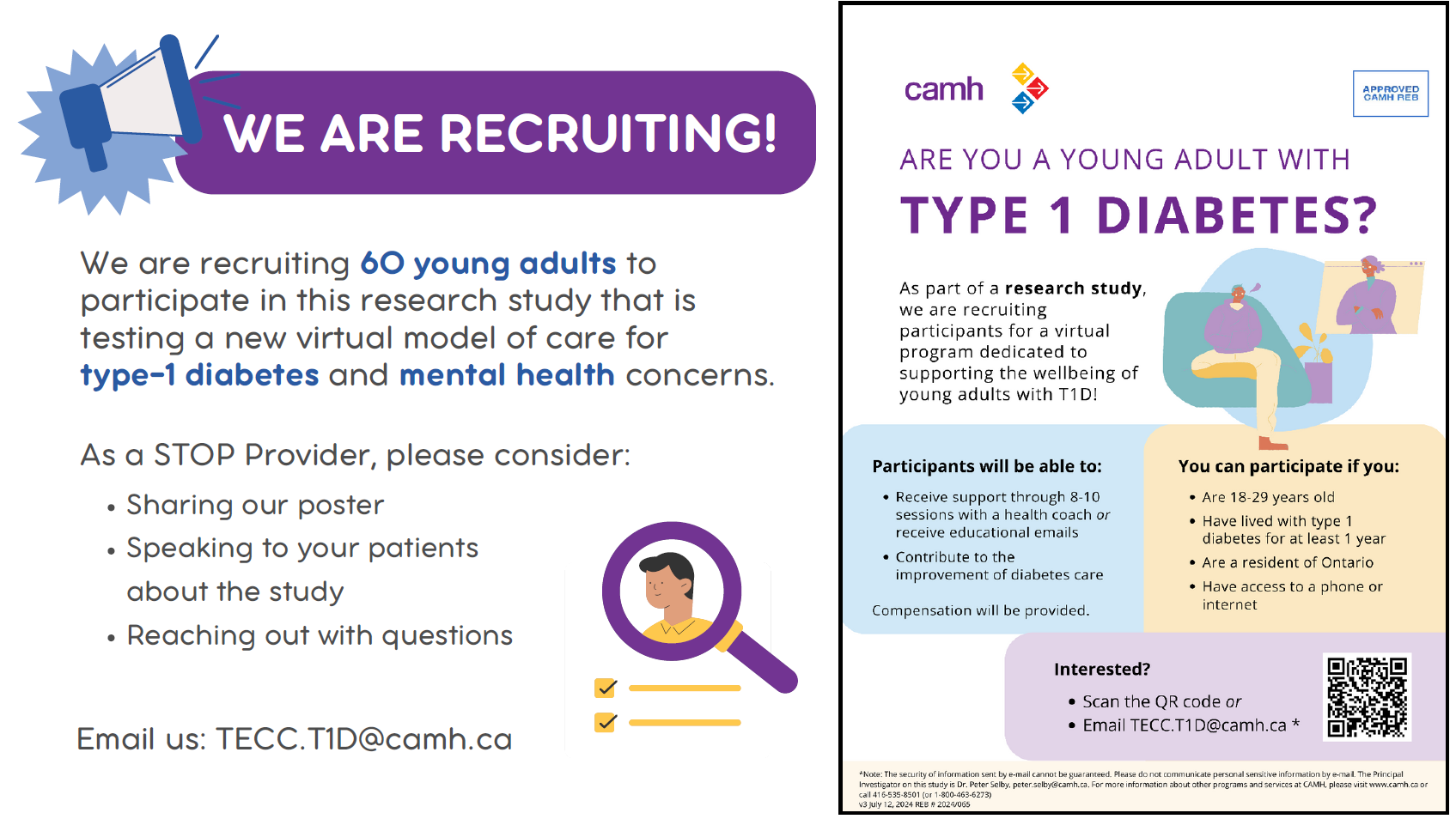
# This initiative is grounded in co-creation and collaboration, cultural- and community-relevance, and OCAP compliance.

# All organizations offering the STOP with AHACs Program are invited to participate in this co-created evaluation. Participation in this initiative is entirely voluntary. The event will take place on January 29 from 12 to 1 p.m. Please connect with STOP if you did not receive the invite.

# An initial webinar for STOP with AHACs Program Implementers was held on November 12, 2024 (11-12:00 pm EST) – a meeting summary and next steps have been sent out.

TECCT1D3 Study Recruitment

**New study** recruiting **60 young adults** to participate in a research study that is testing a new virtual model of care for **type-1 diabetes** and **mental health concerns.** Please circulate the poster below, speak to patients about the study and reach out with questions by emailing [TECC.T1D@camh.ca](mailto:TECC.T1D@camh.ca)



Q&A:

**Q: When will the SOTN changes go live?**

A: The exact date is not yet determined, but we expect it to be end of January or early February. We will update the STOP Community of Practice when the launch date is finalized.

**Q: Is there a reason for the reduction in weeks (for SOTN)?**

A: Internal tracking suggests most people do not use all 10 weeks, so this allows for less waste of resources and allows us to reach more people. We have also introduced an online assessment for varenicline/bupropion which will allow people to consider an alternative to NRT if they’ve tried it and had no success.

**Q: To confirm, is prescription medication covered or will clients need to pay for it themselves?**

A:  The prescription medication is not covered by the STOP Program. Clients or patients with insurance coverage or ODSB should be covered, but should check with their insurance provider.

**Q: Can SOTN include some modules for patients’ education in conjunction with NRT provided?**

A: Thank you for the suggestion. We are gathering suggestions for future updates to the portal.

**Q: Are there any online groups/ongoing peer support for clients who are trying to quit smoking?**

A: STOP is not aware of any community groups for ongoing peer support. The CAMH Nicotine Dependence Clinic offers groups for any patients interested in the Toronto area.

**Q: Why doesn’t the STOP Program offer the spray?**

A: When we last did an analysis, there was no higher quit outcome found for those using mouth spray in comparison to other short-acting NRT. The mouth spray being more costly, we made the decision to remove from the offerings as we always want to ensure more people have access to the STOP Program.

**Q: Will the STOP Program offer the flavoured nicotine pouches?**

A: At this time, STOP will not offer these. Some of these products are manufactured by tobacco companies, not pharmaceutical companies.

**Q: How can we obtain additional mouth pieces to allow clients to sample the inhalers?**

A: They are unfortunately no longer being manufactured and we have a limited supply.

**Q: What is the difference between rostered and non-rostered sites?**

A: Many of our partner sites only treat patients or clients that are formally registered to their clinic. A number of organizations will take patients or clients from the community. We refer the former to be rostered/registered only sites and the latter to be non-rostered sites.

**Q: Is there a live map that practitioners or interested clients can use to look up STOP providers/sites?**

A: Active STOP sites that we refer to as non-rostered sites can be found here: <https://www.easymapmaker.com/map/49cd6fe2c320c9a117d674e2f87739e0>

**Q: How can someone become a STOP provider?**

A: For new staff, please have your site’s existing STOP provider connect you with one of the STOP RCs. You will have to complete the FTI course and must attend the STOP Operations Training. For new sites, please connect with the STOP RCs so they can walk you through the site onboarding and training process.

**We asked the Community of Practice for suggestions on how to promote SOTN**

* Practitioners provided the following suggestions for where STOP can put up promotional material:
  + Public transit (e.g. TTC, bus stops)
  + Community spaces (e.g. smoking areas, malls/shopping centers, pharmacies)
  + Radio advertisements, business cards for reception/waiting areas, pamphlets and posters at HCP offices

News:

**Handing out vapes in the emergency room helps smokers quit**

(<https://www.uea.ac.uk/about/news/article/handing-out-vapes-in-ae-helps-smokers-quit>)

* **Key Findings**: Providing e-cigarette starter packs, advice, and referrals to stop smoking services in emergency departments doubled quit rates compared to standard care, with 23.4% of the intervention group quitting after six months versus 12.9% in the usual care group.
* **Significance**: Emergency departments are effective venues for reaching smokers from deprived areas, offering an opportunity to improve health outcomes and reduce smoking-related diseases by introducing accessible cessation support.
* **Policy Implication**: The trial demonstrates the potential for nationwide implementation of such interventions, which could lead to over 22,000 additional smokers quitting annually and substantial public health benefits.

**Updates to Health Canada’s tobacco and vaping public education campaigns:**

Health Canada is launching another phase of the[*Tools for a Smoke-Free Life*](https://urldefense.com/v3/__http:/www.canada.ca/quit-smoking__;!!FxkXuJIC!e0XXMvAHv5h0w24LcE_Lr4DRSXfB2JzxrAOPgvaIoaCKA9xr89je2fjpdC_09XNHkCGGEmNaJHxJFJcWXst2GyJwNKm_mJyvtg$) campaign, starting in mid-November. The campaign will continue to encourage adults who smoke, to learn more about the array of tools and supports that can help them quit smoking and to make a quit plan. The campaign continues to feature empowering testimonials from people who have successfully quit smoking. The messaging reinforces that quitting is possible and that combining effective approaches improves one’s chances of success. Advertising will continue until early February.

Health Canada is also planning to launch another phase of its youth vaping campaign -  [*Consider the Consequences*](https://urldefense.com/v3/__http:/www.canada.ca/vaping-info__;!!FxkXuJIC!e0XXMvAHv5h0w24LcE_Lr4DRSXfB2JzxrAOPgvaIoaCKA9xr89je2fjpdC_09XNHkCGGEmNaJHxJFJcWXst2GyJwNKlnDbXt4g$) - this winter, to continue to raise awareness about the harms and risks associated with youth vaping. Plans include updating the campaign website, awareness resources as well as [the self-led online](https://urldefense.com/v3/__http:/www.healthcanadaexperiences.ca/__;!!FxkXuJIC!e0XXMvAHv5h0w24LcE_Lr4DRSXfB2JzxrAOPgvaIoaCKA9xr89je2fjpdC_09XNHkCGGEmNaJHxJFJcWXst2GyJwNKl0k4XH5Q$) module. The campaign will focus messaging on the risks of nicotine addiction for youth, as well include more information on vaping cessation. Plans also include further promoting the youth tobacco/vaping cessation program called [*I quit for me*](https://urldefense.com/v3/__https:/www.canada.ca/en/health-canada/services/publications/healthy-living/i-quit-for-me-guide-youth.html__;!!FxkXuJIC!e0XXMvAHv5h0w24LcE_Lr4DRSXfB2JzxrAOPgvaIoaCKA9xr89je2fjpdC_09XNHkCGGEmNaJHxJFJcWXst2GyJwNKk2ZN2foA$). We will provide more detail on timing when possible.

# 2025 teleconference schedule:

|  |  |  |  |
| --- | --- | --- | --- |
| ​January 8\*  \*Changed due to New Year’s Day | ​February 5 | ​March 5 | ​April 2 |
| ​May 7 | ​June 4 | ​July 2 | ​August 6 |
| ​September 3 | ​October 1 | ​November 5 | ​December 3 |

STOP participant quote:

*It took me months to finally quit smoking after I started the program, but I'm approaching 7 months now, and sincerely believe I couldn't/wouldn't have been able to quit without it.*

*I've been so fortunate to access the additional products you recently made available, which has been an incredible relief.*

*Thank you, for everything! I'm so grateful for it all.*

Attendance:

# 360 Degrees NPLC

# Akwesasne

# Anishnawbe Muskiki AHAC

# Algoma PHU

# Algonquin FHT

# AMHS-KFLA

# Arnprior and District FHT

# Athens FHT

# Bancroft FHT

# Black Creek CHC Blue Sky FHT

# Brockton and Area FHT

# Burk’s Falls FHT

# Carepoint CHC

# Carlington CHC

# Central Brampton FHT

# Chatham-Kent CHC

# Chatham-Kent PHU

# CHIRS

# City Centre CHC

# CMHA Durham

# CMHA Ottawa

# CMHA Toronto

# CMHA Windsor

# Credit Valley FHT

# De dwa da dehs nye AHAC

# Dufferin Area FHT

# Durham CHC

# Glengarry NPLC

# Grand River CHC

# Grandview Medical Centre

# Halton ADAPT

# Hamilton PHU

# Happy Valley FHT

# Health for All FHT

# Huronia Transition Homes

# Ingersoll NPLC

# Kawartha Lakes CHC

# KFL&A PHU

# Kingston CHC

# Kirkland District FHT

# Leeds and Grenville FHT

# London InterCHC

# London FHT

# Lower Outaouais FHT

# Loyalist FHT

# Mackay Manor AA

# Napanee CHC

# Niagara North FHT

# North Durham FHT

# North Huron FHT

# North Muskoka NPLC

# Owen Sound FHT

# PAARC AA

# Parkdale CHC

# Queen’s Square FHT

# Rama First Nations

# Rideau CHC

# Scarborough A FHT

# Seaway Valley CHC

# Smithville FHT

# Southwestern Public Health

# St. Michael’s Homes

# STAR FHT

# Stonegate CHC

# Stratford FHT

# Sundridge Medical Centre

# Thunder Bay PHU

# Témiskaming CHC

# Two Rivers FHT

# Upper Canada FHT