LivingSmart – Coaching for Quality of Life through Lifestyle Improvement

Telephone Scripts



ENROLLMENT INTERVIEW

[Presumably, an appointment was made from referral or inquiry for this contact and greetings have been shared.]

We are so happy that you have taken the first step into restoration of your health! You will be ever thankful that you have courageously done so.

The time we spend together now is intended to lay a solid foundation for modeling a coaching program suited to your needs physically and emotionally.

In order to get the big picture of your tobacco-using practices we will begin with an assessment. Let's look at your results in taking the TCAT.

[Or, if have not taken it yet, Please respond to the following questions thoughtfully and honestly.]

ASSESSMENT Questions (TCAT) are asked with sensitivity . . .

They are provided on the website, <u>www.LivingSmart.Live</u>, for participants to complete prior to this call.

.....

Now, let's summarize what we have learned . . . I say "we" because we often learn more about ourselves when we verbalize our behavior, our likes and dislikes, our hopes and our fears, our concerns and our discoveries. (Refer to TCAT results).

RESPONSE:

Review: Tobacco Hx, Nicotine Dependency Scores (2), Reasons for , Readiness, Confidence Level, Concept of Power, Perceived Stress Level, Social Support.

(Discuss results . . .)

(Possible Response . . .)

What you describe is relatively common/unique to tobacco users who are addicted to nicotine. (Explain why) I am confident that, if you determine to follow this program of intervention, you will be successful. When you begin to recognize the improvements to your health as we progress through it, you will be overjoyed!

You will hear some of these assessment questions again during each phone call with you. They are a means of measuring your progress and will guide your coach in addressing your needs and providing the encouragement you crave.

Now I will explain the process of engagement with the CMATCH program, so that you may understand the commitment both you and we are making for your recovery to health.

The coaches of the CMATCH program are professionals who have been trained for this role. They are your resource for wholistic promotion of your health through behavior change. Any medical or self-care advice you otherwise desire should be obtained from your personal physician or nurse practitioner.

However, we want to keep your healthcare provider informed of your progress so that they can also support you. Therefore, we ask you for permission to do so. We will include a consent form in the packet of written materials we send/give you. It must be signed and returned within 10 days. Let us know if you do not receive it. A copy will be sent to your provider.

DECIDING

At this point I would like to give you some insight of how you will decide each day to not use tobacco and about how you decide to get started for this adventure.

You make important decisions every day—in your job, for your family, personally. Scientists are learning (as a result of advanced technology in brain imaging) that decisions arise from patterns of our behavior coupled with emotions that surround them. Briefly, here is how it works:

Let's say you are 9 years old and every Sunday afternoon your dad takes you to an amusement park where you enjoy the rides. But there is one particular activity you especially enjoy—eating buttery popcorn while watching a movie about space travel. In fact, as soon as you enter the park gate your mouth begins to water for the popcorn. But you and Dad have a ritual of riding the roller coaster first.

Your brain has just released *dopamine*, a chemical that regulates your emotions by sending nerve impulses throughout your brain's cortex (the outer portion under your skull). Because repeated trips to the park and the regular routine of activities laid down a pattern of nerve impulses, certain remembering cells reading that pattern alerted your whole brain and familiar emotions swept through your body, making you imagine the taste of the popcorn. Just expecting it brought pleasure.

Now translate that scenario into what you have experienced with using tobacco. Nicotine has elicited pleasure using the same dopamine and patterns of familiar smoking/chewing culture are formed.

We are going to work with you to create new and better patterns around and away from the nicotine road. It will take <u>alertness</u>, <u>smart thinking</u>, <u>confrontation/engagement with the enemy, a persistent desire for a better quality of life, and willingness to try new ways.</u>

Your Mentor will be your encourager and confidante. Your Coach will be your Guide. Your decision to participate in this assessment and orientation session was probably difficult to make—it was based on what you already know and motivation to act. I congratulate you for your courage!

The next decision you must make to begin this program is your <u>quit day</u> – at least 3 days from now. While you are considering that, I will give you an overview of your experience with us for the next 12 months.

OVERVIEW OF CMATCH PROTOCOL

<u>Telephone-based:</u> The phone calls you receive from your coach are specifically scheduled in our program and arranged according to your convenience. We call out to you; you do not call in episodically for help. Coaching calls are begun while **Taking Control** guidance proceeds. On:

Enrollment Day

1 day before you quit (Day 2 of Taking Control)

Quit Day (Day 3 of Taking Control)

Day after Quit Day; 4 days later; 6 days later (Graduation Day)

Then 4 days after Graduation; 2 weeks later

Then spaced out monthly Xs 3, 2 months later; 3 months Xs 2

Totaling 1 Year of Phone Coaching support.

In the meantime, for 14 days, you are to engage in the **Taking Control** program on the CMATCH website – www.LivingSmart.Live. You may view the videos or listen to the podcasts on the website. There are booklet guides to download also. Do you have good access to a computer? A printer?

(Response . . .)

As you can see, it is important to organize your preparations for engagement in this adventure. The **Taking Control** program gives instructions for preparations and daily quitting strategies for 2 weeks. It is very important that you examine **Taking Control** today and read/listen to the preparation instructions in Day One. At the time you set your Quit Day of tobacco use, this phone coaching service can begin.

At the end of each call, your coach will arrange with you the time for the next call. <u>It is extremely important that you keep those appointments.</u> If you must make a change, send us an email at least 1 day before the appointment time and offer an alternative time.

So	Your	Quit	Day is	?	
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Are You Ready?

Confidence Scale (Use Highlight Tool)

1. I feel sure that I am able to quit smoking as planned. 1 2 3 4 5

DisAgree Not Sure Agree

Rx AIDS

You may wish to use over-the-counter cessation aids or an Rx from your health provider during this program. You may discuss that with your coach and your primary care provider.

Are there any questions?

I am excited for you today! I have immense hope for your success.

Closure . . .

Call #2: Quit Day Minus One (the day before quit day)

Coach Note: Review TCAT responses and previous conversation of Enrollment Call to prepare.

The Coach will notice that the tone of these calls is patterned on 5 terms:

Affect=the tone quality of speech and word formations that conveys caring and nurturing

Attitude=Conveying positive expectations and interest in his/her struggles and victories

Aspiration=Bringing hope and establishing confidence in self – looking to future goals

Activity=Positive action to occupy the mind and heart

Accomplishments=Diligent affirmation of each expressed goal fulfillment

GREETING		
quit smoking. Thi		, calling to assist you in your program to strategically-scheduled phone conversations we will
Affect: How are yo	ou today (this morning, th	is evening)?

Attitude

Periodically your coach will refer to these questions through the months we work together as a way to measure your progress.

Aspiration

In your enrollment interview you indicated you are ready to learn how to quit with **Taking Control** and this CMATCH method. Is that right? Well, I am pledged to help you reach success. And, as experience has borne out, when making a major change in your life, it is wise to measure progress along the way to build confidence and zeal. We will be doing that in these phone calls.

Review the **TCAT Summary** . . .

Have you examined **Taking Control** yet?

Do you have a sense of its format?

Have you begun listening to and reading the instructions?

Do you foresee any problems?

As you have indicated to us, tomorrow is to be your Day to Quit Smoking/using tobacco. How are your plans progressing for that?

Activity:

u u u u u u u u u u u u u u u u u u u	Identified difficult situations and tactic Support system established Fluid and nutritional supplies in place Relaxation retreat strategies in place Visual reminders of smoking remove Positive notes of encouragement possequential rewards for little victories Physical activity regimen scheduled Other important decision-making or from now Spiritual strategies planned	doubt and weakness ready – Such as ical plan in place e ed from usual and favorite areas of activity ested
	a few questions to ask you which will freedom from nicotine addiction.	help me as a coach to guide you in reaching your
Learni CS	ng Style Highlight any traits that char 1. I am practical like structure predictable efficient (CS = concrete sequential thinker/le	steady organized reliable
AS	2. I am a reflective thinker studion idea maker have to (AS = abstract sequential thinker/lea	o know the facts first
AR	3. I am emotional, love the humanities, I "go with the flow" (AR = abstract random thinker/learne	people-oriented love a comfortable environment sensitive er)
CR		love change a creative problem-solver prefer to know only what's necessary ner)
A/V/K	5. I learn best by:listening	seeing,reading touch
	6. I prefer to receive feedback on my	y progress:
	frequently soon	occasionally seldom never

a

Interpretation

1. The <u>abstract sequential learner</u>. This individual is easily able to decode written, verbal, and image symbols. Symbols and pictures are important to this learner, as are presentations that are rational, substantive, and well-organized.

- 2. The <u>abstract random learner</u>. This person is skilled in sensing and interpreting atmosphere and mood. For this learner, the medium is associated with the message, and a speaker's manner, delivery, and personality are as important as what is spoken. Information is gathered in an unstructured manner, reflected upon, and then organized into a pattern that makes sense to the learner.
- 3. The <u>concrete sequential learner</u>. This learner prefers hands-on experiences that use all five senses and step-by-step directions and well-ordered presentations and will defer to authority and guidance in the learning environment.
- 4. The <u>concrete random learner</u>. This person likes to experiment, comes to the crux of the matter quickly and uses intuition in drawing conclusions. This learner prefers a trial-and error approach to gathering information and does not welcome teacher intervention.

Let's go over the Taking Control checklist from your workbook and see if your are prepared for this journey . . .

- ✓ Have self-speak arguments against doubt and weakness ready Such as . . . (Participant states them)
- ✓ Identify difficult situations and a tactical plan in place for them
- ✓ Support system established
- ✓ Fluid and nutritional supplies in stock
- ✓ Relaxation retreat strategies in place
- ✓ Visual reminders of smoking removed from usual and favorite areas of activity
- ✓ Positive notes of encouragement posted around
- ✓ Sequential rewards for little victories arranged
- ✓ Physical activity regimen scheduled
- ✓ Other important decision-making or public presentations scheduled no sooner than 2 weeks from now
- ✓ Spiritual strategies planned

Attitude: Tell me how important to you quitting smoking is
Name 3 Benefits you expect to experience after quitting: 1)
2)
3) Where is your strength going to come from? You are entering a stage of your life that require Courage – not just the absence of fear, but an inner sense of Power.
Who are you going to call on for encouragement and help?
What time do you want me to call you tomorrow?

Coach: Refer to this chart for additional motivation strategies to insert in the conversation.

Contemplative Smoking, but motivated to quit sometime; if hesitant, apply these strategies.						
Behavior Strategies	Chemical Dependence	Coaching/Relapse Prevention				
List harmful effects of tobacco use; list own health problems	Identify self-management weaknesses and the consequences	Seek help from a counselor (you)to set quit date, learn how				
List all triggers that stimulate the urge to use tobacco	Consider alternative actions	Develop a strategic plan; enroll in cessation program				
List coping skills/ identify new ones	Identify fears about control & deprivation	Attend individual/group education sessions; join a support group				
Plan for a wholistic lifestyle program	Recognize that life has centered around use of tobacco	Now you will be a new personhealthier				
Identify reasons for quitting; cost-benefit analysis	Clarify values and the role smoking played Acknowledge that will power is inadequate	Introduce/Encourage seeking the Heavenly PowerSource; Offer hope.				
Observe non-smokers as models	Declare willingness to change					
	Action & Preparation					
Select quit date; follow cessation plan	Accept need for recovery, assistance. Engage in active cessation effort.	Coach according to plan; offer social support structure solutions				
Change lifestyle behaviors to enhance health; clean up environment	Be accountable to coach and supporters Maintain contact; keep appointments	Require accountability. Be pro-active to offer strategies to avoid lapses				
Reduce risks to lapse: triggers, stress, influence of others, fears	Be prepared for the unexpected with alternative strategies to prevent lapse	Diligently reinforce learning				

Call #3: Quit Day	ı					
GREETING						
This is encouragement as we a		, C	alling to	o give y	ou/ou	
How are you today?						
f I could be a little spide are going	er on your wall today, what	would I see?		Tell r	ne how	things
Now tell me about 2 pos	sitive/encouraging events t	hat have happe	ned to	day		
•	e tobacco comes from memories associated with	•	smoke) ,		
	or when I am under stre	•	5	4	3	2
2. My desire to us when I begin to feel ou	e tobacco comes from a ut of control.	need deep ir 5	nside, 4	3	2	1
Score lower than 3 = Hi	gh Risk	Subt	otal			
Did you prepare for toda program Taking Contro	ay by engaging in the informul?	mation and acti	vities d	escribe	ed in the	self-help
Are you using a pharma	ceutical aid? If so, describ	oe it and how yo	ou are ι	using it	?	
focus your though	to: little package of weeds phts on what you think you red and nervous, anxious, bout your behavior	•	tle unfo	cused		
use that lethal	riences are temporary our Heart	as long as you	do not	slip wh	en tem _l	oted to

Confidence Scale (Use Highlight Tool) 1. I feel sure that I am able to quit tobacco as planned.	1 DisAgree	2	3 Not Sure	4	5 Agree
If 3 or less: "What can we do to raise that score?"					
Let's review again your major strategies for today Food and Fluid intake					
Physical activity Environmental protection Social cautions	Option	al Pharı Mindse	maceuti	cal aids	;
Acceptance of help/encouragement	Social		t resour	ces	
 Introduce Spiritual Component Do you have a spiritual belief system that frames you Discuss what it is If not, ask: Do you believe there is an all-powerful of If not, ask: Would you like to learn about Him? If "Yes," state: God, who created this earth and even 	God in h		interest	ed in vo	ou. In
fact, He is able to help you gain victory over nicotine addiction. Would you like to learn more about the Creator Good	tion.				
direct to www.amazingfacts.org or www.iiw.org .)					
If "yes" to a spiritual belief system, ask: 1. What word or image best describes God to you?					
2. Do you have a relationship with God? If "Yes", ask: Has your relationship with God been have gone through difficult times? Usually	•	•	,	t when Neve	-
3. How do you presently feel about your relationship with 0 Good Somewhat feel good Not pleased		☐ Seldo	om think	c about	it
4. Would you like to know Him better?					
We coaches like to pray with our clients for God's blessing addiction. Would you like me to pray with you at the close [] Yes [] No			s over n	icotine	
[If they indicate an interest/need to talk with a spiritual cour conversations offer that referral.]	nselor, ir	n any of	the follo	owing	
Closure You may have recognized there is a pattern to the way we	nold our	· conver	sation v	vith you	ı. We

You may have recognized there is a pattern to the way we hold our conversation with you. We are framing our questions on 5 dimensions of behavior change: <u>Affect</u> (your tone of voice and the interest we perceive), <u>Attitude</u>, <u>Activities</u>, <u>Aspirations</u>, and <u>Accomplishments</u>.

Focus on your Goal. . . . the Benefits to you/your family . . . your Commitment

• Imagine the new pathway of neurons being laid down in your brain.

- Conjure up a positive, pleasant attitude. Wear a smile.
- Plan and do a good deed for someone in need of you.

Any questions?

When would you like for me to call you tomorrow to continue support?

Prayer: Until then . . .

Call #4: Day 4 - Day After Quit Day

GREETING					
This is arranged yesterday.	from	calling to	encour	age you	ı as we
How is your courage today?	Tell me how the day has b	een going			
SCALE: Profile of Mood (C	Call up pdf document) (Days	s -1, 14, 28	, 6 mon	ths, 1 y	ear)
Since I talked with you yeste	rday, have you had an urge	to use tob	acco?	🛚 Yes	□ No
How many urges? (constant	or triggered by cues)				
Have you had even one puff	of a tobacco-delivering dev	ice?	☐ Yes	□No	

LAPSE - 1

CDEETING

For "lapsers"

That is not unusual; you have not relapsed. In fact, you will not "relapse" until you smoke regularly again. This may be a pattern of your previous quit attempts, but you can learn something from this event and that is why I am calling you often to support your quitting efforts.

Were you overly optimistic? Were you over-confident?

Remember *dopamine*? Perhaps you will want to call him "dope of mine" in this case (!) He only needs a change in his work design and you need to help him do it. In fact, you are the only one who can!

Next time you recognize that he has "spilled the beans"—alerted your brain to expect another dose of nicotine, hold off for 5 minutes. Instead during that 5 minutes do something <u>nice</u> for yourself. Go for a walk, make a smoothie, call a friend. When dopamine realizes the expected nicotine is not forthcoming, the level will drop and your brain cells will scramble to calculate the error—what went wrong. Then they will create an alternate pattern. The old pattern will be archived. But don't allow dopamine to send for it again! You will win the victory!

When in your lifetime before have you made up your mind to do something and actually did it?

Has there been another habit that you quit? Has there been a change in a job or relationship?

What did you do that worked?
What did you do to prepare for that change?

Tell me a little about how you succeeded in making that change . . . Obstacles that you overcame.

What did that mean to you about your ability?

Now, if you continue to have the desire to quit you had 2 days ago, we can go on with your program by taking inventory and revising your day-to-day strategies. Do you want to spend some time in doing that?

Good, then let's continue.

(Review leading events toward lapse; lead client to alter countering strategies; avoid cues; bolster with proper use of pharmaceutical aid or social support, discuss prayer and meditation.)

How are others around you reacting to your abstinence from tobacco? What do they say?

Are you experiencing any discouragement from anyone? (If Yes) Would you like to talk about it? (If Yes, continue with introduction to Couple-Focus Dimension with . . .

ASSESSMENT FOR SABOTAGE

- 1. If you feel someone close to you is hindering your quitting efforts, in what way is this happening?
- 2. Is this individual (or those individuals) also a smoker?
- 3. Have you discussed your quitting program with them? (If No) May I suggest how to do that?
- 4. If a smoker, is he/she) thinking about quitting? (If Yes) Would this individual be willing to join us for (a) education about the program, (b) help in quitting also? May I send information about CMATCH to that individual?

(If has discussed) Will you invite him/her to a conference call with us?

5. (If individual is resistant to change and uncooperative in participants quitting efforts, advise regarding coping, building personal strengths, avoidance strategies; re-frame goals and objectives.)

Offer prayer.		

For compliant participants

You have done well! Congratulations! Reward yourself tonight with a simple thing. What do you have planned as a reward for the end of this week? Hold that thought.

Name at least one thing you did or thought in the last 24 hours that helped you to stay off tobacco.......

Continue with your strategic plan.

Would you like to join me in a prayer of thanksgiving?

 As you are learning in your daily messages from Taking Control, having the support of a friend or family member for a partner is very important to your success.

- Getting your co-workers on your side is too.
- It is a public commitment on your part that should strengthen your resolve.
- Focus on your Goal . . . the Benefits to your/your family . . . your Commitment
- Imagine the new pathway of neurons being laid down in your brain
- Conjure up a positive, pleasant attitude. Wear a smile.
- Plan and do a good deed for someone in need of you.

I will call you in 4 days. \	What time?
Offer prayer	
Until then	

Call \$5: 8th Day from Start

GREETING				
This is	_ from	_ with	your encour	aging support call.
How are you today?				
If I could be that spider on	the wall today, what would I s	see th	ere?	
Since I talked with you las How many urges? (consta	t, have you had an urge to sm ant or triggered by cues)	oke?	☐ Yes	□ No
Have you had even one p	uff of a tobacco-delivering dev	/ice?	☐ Yes	□ No

LAPSE - 2

For "lapsers"

As I mentioned in the previous call, this may be a pattern of your previous quit attempts, but you can learn something from this event and that is why I am calling you often to support your quitting efforts.

Now, if you continue to have the desire to quit you had 4 days ago, we can go on with your program by taking inventory and revising your day-to-day strategies. Do you want to spend some time in doing that?

Good, then let's continue.

(Review leading events toward lapse; lead client to alter countering strategies; avoid cues; bolster with proper use of pharmaceutical aid or social support, discuss prayer and meditation.)

In order to give you the best advantage in coaching, if you lapse before the next call, we will require you to return to the status of Quit Day, essentially starting over.

Let's Review your Reasons to Quit (get out your Taking Control Workbook) . . . Let's also review the Benefits you have marked that you desire . . .

Depression Assessment (Beck Depression Tool) For All (Spreadsheet available)

I am going to ask you some questions related to your mood. I will ask them again in 3 months, 6 months, and 1 year. If we, together, are doing the job right, we should see improvements in the future.

1.	I am not particularly discouraged about the future.	1 pt.
	I feel discouraged about the future.	2 pts.
	I feel I have nothing to look forward to.	3 pts.
	I feel the future is hopeless and things cannot improve.	4 pts.
2.	I do not feel like a failure.	1 pt.
	I feel I have failed more than the average person.	2 pts.
	As I look back on my life, all I can see are failures.	3 pts.

	I feel I am a complete failure as a person.	4 pts.
3.	I don't feel I am worse than anybody else.	1 pts.
	I am critical of myself for my weaknesses and mistakes.	2 pts.
	I blame myself all the time for my faults.	3 pts.
	I blame myself for everything bad that happens.	4 pts.
4.	I don't cry any more than usual.	1 pts.
	I cry more now than I sued to.	2 pts.
	I cry all the time now.	3 pts.
	I used to cry, but now I can't cry even though I want to.	4 pts.
5.	I am no more irritated now than I ever was.	1 pt.
	I get annoyed or irritate more easily than I used to.	2 pts.
	I feel irritated all the time.	3 pts.
	I don't' get irritated at all by things that used to upset me.	4 pts.
6.	I can work without difficulty.	1 pt.
	It takes an extra effort to get started at doing something.	2 pts.
	I have to push myself very hard to do anything.	3 pts.
	I can't do any work at all.	4 pts.
7.	I can sleep as well as usual.	1 pt.
	I don't sleep aw well as I used to.	2 pts.
	I wake up 1 or 2 hours earlier than usual and find it hard to get back to sleep.	-
	I wake up several hours earlier than I used to and cannot get back to sleep.	4 pts.
8.	I do not feel sad.	1 pt.
	I feel sad.	2 pts.
	I am sad all the time, and I can't snap out of it.	3 pts.
	I am so sad or unhappy, I can't stand it.	4 pts.
Tot	al Points	•

Scoring:

8 = No depression present

16 = Mild depression, able to function; will lift in a few weeks. Encourage healthy lifestyle. Review in near future.

24 = Moderate depression, able to function with difficulty; help from professional highly recommended

32 = Severe depression, must have professional help.

There often is a close link between mood and nicotine addiction. The principles taught and the activities encouraged in this program, particularly in **Taking Control**, are natural methods to restore health and vitality to your body and mind. Sometimes people need additional aids in the form of a prescription medication to help in coping with addiction withdrawal. If your health care provider has prescribed one for you, continue to take it while following the instructions in this program.

Confidence Scale (Highlight)					
1. I feel sure that I am able to quit tobacco		2	3	4	5
If less than 4, "What can we do to raise the	DisAgree number?"	Not Sur	9	Agree	
Let's review again your major strategies for	today				
Food and Fluid intake	Acceptance of help	/encoura	gement		
Physical activity	Optional Pharmace	utical aid	s		
Environmental protection	Mindset				
Social cautions	Spiritual res	ources (l	Discuss	if possi	ble)
Focus on your Goals (Day One) the Be Are you carrying your Commitment Card?			our Com	nmitmei	nt
Affirm.					
Prayer					
I would like to call you on Day 14 of TC—G	raduation Day; time _				
Until then,					

Call #6: Graduation Day!						
GREETING						
This is calling fro	m wit	h your support	call again.			
Today is Graduation Day. How do	you feel about it?					
Are you noticing anything new abo	out how you feel or beha	ave? Tell m	e about it			
How are others around you reacting	g to your abstinence fro	om tobacco?	What do the	y say?		
You have done amazingly well!	Congratulations! Rewa	ard yourself a	simple, healtl	hy way.		
ASSESSMENT FOR SABOTAGE 1. If you feel someone close to you is hindering your quitting efforts, in what way is this happening? 2. Is this individual (or those individuals) also a smoker? 3. Have you discussed your quitting program with them? (If No) May I suggest how to do that? 4. If a smoker, is he/she) thinking about quitting? (If Yes) Would this individual be willing to join us for (a) education about the program, (b) help in quitting also? May I send information about CMATCH to that individual? Email (If has discussed) Will you invite him/her to a conference call with us? 5. (If individual is resistant to change and uncooperative in participants quitting efforts, advise regarding coping, building personal strengths, avoidance strategies; re-frame goals and objectives.)						
Confidence Scale 1. I feel sure that I am able to quit	smoking as planned.	1 2 DisAgree	3 4 Not Sure	5 Agree		
If 3 or less, "What can we do to rais	se it?"					
Any changes in your strategies?	Any changes	in your routine	? Contingenci	es?		
Since I talked with you last, have you How many urges? (constant or trig	J	e? 🛚 Yes	□ No			
Have you had even one puff of a to	bacco-delivering device	e? [] Yes [] No				
Did you prepare for today by engagorogram Taking Control ? Yes	ging in the information a	and activities de	escribed in the	e self-help		

Are you using a pharmaceutical aid? If so, describe it and how you are using it?

Any special concerns? This is your time to express your feelings about this process or to seek more information.

(If doing well with no lapse)

I will call you again 4 days from now – Cal #7. What time will be convenient?

(If confidence is still low and if lapsed at least once)

I will call you again in 4 days; that is 18 days since we started. What time is convenient? (use same script)

Would you like to pray? Affirm. Bye

LAPSE - 3

(Special discussion with "lapser" who by now may be "relapsers" – requiring a later Quit Day and recycling.)

As we discussed the last time we talked, at the third lapse into smoking one or more times, we recommend that you return to your Quit Day—Day 3 in Taking control—and continue on from there again with determination. This is not in any way a sign of failure or defeat. Smokers who are intensely addicted or who have practiced the habit for much of their lives make on average 4 attempts to quit before they are really successful. But we want to help you reach success earlier. By going through the steps of preparation of mind, environment, and body carefully and hearing the motivating messages again, you are more apt to succeed. And receiving these supportive and encouraging calls will reinforce your efforts at creating a new healthy lifestyle.

So re-examine your situation over the next 24 hours and we will call you to arrange when we can pick up our conversations at Quit Day again.

Would you like to pra	؛ ٧
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Affirm.

Bye

Call #7 -- 18 days from Start

GREETING					
This is	calling from	with your	support call ag	jain.	
How are you today?					
-	ou yesterday, have you honstant or triggered by	•	bacco? 🛚 Yes	□ No	
Have you had even o	ne puff of a tobacco-de	livering device?	′es 🛮 No		
Confidence Scale 1. I feel sure that I ar	m able to quit smoking a	as planned. 1 DisAgree			I
If 3 or less, "What car	າ we do to raise it?"				
Any changes in your	strategies?	Any changes in you	r routine? Cont	tingencies?	
-	ou last, have you had an constant or triggered by	•	? [] Yes [] No		
Have you had even o	ne puff of a tobacco-de	livering device? [] Ye	es 🛮 No		
Did you prepare for to program Taking Con	oday by engaging in the trol ? I Yes I No	e information and act	ivities describe	ed in the sel	f-help
Are you using a phar	maceutical aid? If so, d	lescribe it and how y	ou are using it	?	
Periodically we ask for a breathing test to scheduled phone app	efer to Description or a validating test for eiverify your abstinence cointment, please go to onitoring) and report your	ther <i>cotinine</i> , a by-pi from tobacco. The c your primary care p	lay (or two) bet rovider's office	fore our nex to do your	ct first
Any special concerns more information.	? This is your time to	express your feeling	s about this pr	ocess or to	seek
How are things with v	our helping partner this	s week?			

Tell me about the changes you have been able to make in your lifestyle:

Nutrition

Exercise
Coping with Stress
Rest/Relaxation
Meditation/Prayer
Human Relationships
In reviewing your Goals, do you wish to make any changes?
Are they helping you in your strategy to quit? How?
Nicotine addiction recovery is real, but you must be cautious to not let down your guard to your commitment and you must maintain adherence to your quitting strategies because the "war" is not over. It takes at least 28 days to turn yourself around effectively. And for some, there will always be a memory of the love affair with nicotine.
That's why this case management approach to helping you is so intensive. Be thinking of long-range plans you may have for your self-improvement or reaching out in your community. We will discuss them then,
(If doing well with no lapse) I will call you again in 2 weeks. What time will be convenient?
Would you like to pray?
Affirm.

Bye

Call #8 - 32 Days from Start

GREETING							
This is	calling from	with	your su	ipport c	all agai	n.	
How are you today?							
SCALE: Confidence 1. I feel sure that I am	able to quit smoking as	planned. DisAgree		2 Not Sure			5
If 3 or less, "What can	we do to raise it?"						
•	g Control program as su end. What plans are yo	•	-			-	nimize
What have you discove	ered about yourself over	the past few	days?				
How do you feel physic	cally and mentally now?						
	you, have you had an u (constant or tr	-		6	□ No		
Have you had even on	e puff of a tobacco-deliv	vering device?	Ye:	S	□ No		
Affirm.							
BIOTEST RESULTS What was the result of	your breathing/cotinine	test prior to tl	his pho	ne call?	?		
water intake, daily exer and building good rela	e importance of those li rcise, stress reduction s tionships. Add to those s, aromatherapy, massa	trategies, avoi some compli	dance mentar	of mind	-alterin	g substa	ances,
Next call: one month.	Day, Tir	me					
Offer prayer, Bye							

Call \$ 9 – 62 Days from Start

GREETING					
GREETING					
This is					
SCALE: Confidence					
You have been nicotine-free for more than a month now, he	ow is yo	ur confi	dence?		
I feel sure that I am able to quit tobacco as planned.	1	2	3		5
(If less than 4, "what can we do to raise it?")	•	Not Sure		Agree	
What have you discovered about your ability and inner stre	ngth?				
Who or what has been most influential in getting you to this	s point?				
How are you feeling physically? Mentally?	Emotio	nally?			
SCALE: Perceived Stress Scale (modified)					
In the last week, how often have you		•	Freq. S	eldom	Never
1. Felt that you were unable to control important things in y	our life	?4	3	2	1
2. Questioned your ability to handle personal problems?		4	3	2	1
		4	2	2	1
3. Felt that things were not going your way?		4	3		
4. Been unable to control irritations in your life?		4	3	2	1
					1 1
4. Been unable to control irritations in your life?		4	3	2	
4. Been unable to control irritations in your life?5. Felt difficulties were piling up too high to overcome?	Risk =	4	3	2	
4. Been unable to control irritations in your life?5. Felt difficulties were piling up too high to overcome?Subtotal	Risk =	4	3	2	
 4. Been unable to control irritations in your life? 5. Felt difficulties were piling up too high to overcome? Subtotal Low risk = 1-10 points; Moderate Risk = 11-15 points; High 		4 4 16-20 p	3 3 oints	2 2	1
 4. Been unable to control irritations in your life? 5. Felt difficulties were piling up too high to overcome? Subtotal Low risk = 1-10 points; Moderate Risk = 11-15 points; High Discuss results Are there any others in your household gaining encourage me about it Do you have any concerns? 		4 4 16-20 p	3 3 oints	2 2	1
 4. Been unable to control irritations in your life? 5. Felt difficulties were piling up too high to overcome? Subtotal Low risk = 1-10 points; Moderate Risk = 11-15 points; High Discuss results Are there any others in your household gaining encourage me about it 		4 4 16-20 p	3 3 oints	2 2	1

GREETING						
This is calling from						
How are things today?						
How have you been since we last talked?						
You have been nicotine-free for 3 months n	now, how is you	r confiden	ce?			
SCALE: Confidence						
1. I feel sure that I am able to quit tobacco	as planned.	1 2 DisAgree		3 Not Sure	4	5 Agree
How are you feeling physically?	Mentally?	Emotiona	ally?			
Do the weekends pose any new problems f	for you? How c	lid you dea	al with	tempta	ations?	
I wish to emphasize the importance of those lifestyle practices that relate to good nutrition and water intake, daily exercise, stress reduction strategies, avoidance of mind-altering substances, and building good relationships. Add to those some complimentary techniques for comfort such as dietary supplements, aromatherapy, massage, and meditation.						
Do you have any concerns? Affirm. Offer to pray.						
I wish to call you in one month – Day		Time				
When should we talk?						

Biotest

Call #10: – 92 days from Start

The day (or two) before our next scheduled phone appointment, please go to your primary care provider's office to do your breathing test (CO monitoring) or the cotinine test and report your results at the next call from your support coach. Thank you.

Call #11 – 4 months from Start

GREETING
This is calling from
How are things today?
How have you been since we last talked?
How is your confidence in this life change?

SCALE: Confidence

1. I feel sure that I am able to stay quit of tobacco use as planned. 1 2 3 4 5

DisAgree Not Sure Agree

How are you feeling physically?

BIOTEST RESULTS

What was the result of your breathing/cotinine test prior to this phone call?

SCALE: Depression Scale (Spreadsheet available)

Depression Assessment (Beck Depression Tool)

I am going to ask you some questions related to your mood. I will ask them again in 3 months, 6 months, and 1 year. If we, together, are doing the job right, we should see improvements in the future.

iutui	C.		
1.	Ιa	m not particularly discouraged about the future.	1 pt.
		I feel discouraged about the future.	2 pts.
		I feel I have nothing to look forward to.	3 pts.
		I feel the future is hopeless and things cannot improve.	4 pts.
	2.	I do not feel like a failure.	1 pt.
		I feel I have failed more than the average person.	2 pts.
		As I look back on my life, all I can see are failures.	3 pts.
		I feel I am a complete failure as a person.	4 pts.
	3.	I don't feel I am worse than anybody else.	1 pts.
		I am critical of myself for my weaknesses and mistakes.	2 pts.
		I blame myself all the time for my faults.	3 pts.
		I blame myself for everything bad that happens.	4 pts.
	4.	I don't cry any more than usual.	1 pts.
		I cry more now than I sued to.	2 pts.
		I cry all the time now.	3 pts.
		I used to cry, but now I can't cry even though I want to.	4 pts.
	5.	I am no more irritated now than I ever was.	1 pt.
		I get annoyed or irritate more easily than I used to.	
		2 pts.	

I feel irritated all the time.	3 pts.
I don't' get irritated at all by things that used to upset me.	4 pts.
6. I can work without difficulty.	1 pt.
It takes an extra effort to get started at doing something.	2 pts.
I have to push myself very hard to do anything.	3 pts.
I can't do any work at all.	4 pts.
7. I can sleep as well as usual.	1 pt.
I don't sleep aw well as I used to.	2 pts.
I wake up 1 or 2 hours earlier than usual and find it hard to get back to sleep	o. 3 pts.
I wake up several hours earlier than I used to and cannot get back to sleep.	4 pts.
8. I do not feel sad.	1 pt.
I feel sad.	2 pts.
I am sad all the time, and I can't snap out of it.	3 pts.
I am so sad or unhappy, I can't stand it.	4 pts.
Total Points	
Scoring:	
8 = No depression present	
16 = Mild depression, able to function; will lift in a few weeks. Encourage	healthy
lifestyle. Review in near future.	
24 = Moderate depression, able to function with difficulty; help from profe	essional
highly recommended	
32 = Severe depression, must have professional help.	
Discuss results	
Have you discovered any new strategies? Discarded others?	
Thave you dissert our ally flow our alogics. Bissurada curiors.	
Have you taken on any new projects that are fulfilling?	
	•
Being free of an addiction brings elation and a feeling of taking on the world to some. H	ave you
had that type of reaction to your new freedom?	
Do you have any concerns?	
My next call to you should be in 2 months—that will be the 6 month mark! What day will good for your	l be
good for you:, Time	
Affirm.	
Offer to pray.	
r y	
Bve	

Bye

Call # 12 – 6 months from Start

GREETING				
This is calling from				
How are things today?				
How have you been since we last talked?				
You have been nicotine-free for how many days now? How is yo	ur confide	ence?		
SCALE: Confidence				
1. I feel sure that I am able to stay free as planned. 1 DisAgree 2 How are you feeling physically?	3 Not Sure	4	5 Agree	
SCALE: Stress I am going to ask you some questions too about how you are de Perceived Stress Scale (modified)	aling with	stress	6.	
In the last month, how often have you	•	-	Seldom	_
1. Felt that you were unable to control important things in your life.	e'?4 4	3	2 2	1 1
2. Questioned your ability to handle personal problems?3. Felt that things were not going your way?	4	3	2	1
4. Been unable to control irritations in your life?	4	3	2	1
5. Felt difficulties were piling up too high to overcome them? Subtotal	4	3	2	1
Low risk = 1-10 points; Moderate Risk = 11-15 points; High Risk =	= 16-20 p	oints		
Discuss				
How are those long-range plans you may have for your self-improcommunity?	ovement (or reac	ching out	t in your
What would you like to do in your community? Or, what have you	u started?	?		
Our next call will be in 3 months on What time?		_		
Until then				
Affirm.				
Offer to pray. Bye				

Call # 13 – 270 Days from Start

GREETING							
This is calling from	•						
How are things today?							
How have you been since we last talked?							
SCALE: Confidence							
1. I feel sure that I am able to persist in cessation.	. 1 DisAgre		3 Not Sure		5 Agree		
How are you feeling physically? Menta	ally?	Emotio	onally?				
Biotest The day (or two) before our next scheduled phone appointment, please go to your primary care provider's office to do your breathing test (CO monitoring) or the cotinine test and report your results at the next call from your support coach. Thank you.							
Friendly discussion							
Our next call will be in 3 months it could be out end to our relationship	r last for	mal con	tact, bu	t should	l not put an		
What day will be convenient with you then?		_ Time					
Offer Prayer							
Until then							

Call #14 - 1 year from Start GREETING . . . This is _____ calling from _____. How are things today? How have you been in the two weeks since we last talked? **BIOTEST RESULTS** What was the result of your breathing/cotinine test prior to this phone call? **SCALE: Confidence** (If lapsed:) 1. I feel sure that I am over tobacco as planned. Not Sure Agree DisAgree **SCALE: State of Well-Being** How are you feeling physically? Mentally? Emotionally? **SCALE: Stress** I am going to ask you some questions too about how you are dealing with stress. **Perceived Stress Scale (modified)** In the last month, how often have you . . . Always Freq. Seldom Never 1. Felt that you were unable to control important things in your life?4 3 2 1 2. Questioned your ability to handle personal problems? 4 3 2 1 3. Felt that things were not going your way? 4 2 1 3 4. Been unable to control irritations in your life? 4 3 2 5. Felt difficulties were piling up so high you couldn't overcome them? 3 2 **Subtotal**

Low risk = 1-10 points; Moderate Risk = 11-15 points; High Risk = 16-20 points

Discussion . . .

SCALE: Depression

Depression Assessment (Beck Depression Tool)

I am going to ask you some questions related to your mood. I will ask them again in 3 months, 6 months, and 1 year. If we, together, are doing the job right, we should see improvements in the future.

1.	I am not particularly discouraged about the future.	1 pt.
	I feel discouraged about the future.	2 pts.
	I feel I have nothing to look forward to.	3 pts.
	I feel the future is hopeless and things cannot improve.	4 pts.
	2. I do not feel like a failure.	1 pt.
	I feel I have failed more than the average person.	2 pts.
	As I look back on my life, all I can see are failures.	3 pts.
	I feel I am a complete failure as a person.	4 pts.
	3. I don't feel I am worse than anybody else.	1 pts.
	I am critical of myself for my weaknesses and mistakes.	2 pts.
	I blame myself all the time for my faults.	3 pts.
	, , , , , , , , , , , , , , , , , , , ,	4 pts.
		1 pts.
	•	2 pts.
	•	3 pts.
		4 pts.
		1 pt.
	· ·	2 pts.
		3 pts.
	· · · · · · · · · · · · · · · · · · ·	4 pts.
		1 pt.
		2 pts
		3 pts.
	•	4 pts.
	·	1 pt.
		2 pts.
	· · · · · · · · · · · · · · · · · · ·	3 pts.
		4 pts.
		1 pt.
		2 pts.
	· ·	3 pts.
		4 pts.
	Total Points	
	Scoring:	

8 = No depression present

- 16 = Mild depression, able to function; will lift in a few weeks. Encourage healthy lifestyle. Review in near future.
- 24 = Moderate depression, able to function with difficulty; help from professional highly recommended
- 32 = Severe depression, must have professional help.

POST ASSESSMENT & SATISFACTION SURVEY

I have several questions to ask you for an Exit Assessment to measure outcomes, so let's get started.

We have really enjoyed helping you in your efforts to start living without tobacco! We would like to keep in touch and we encourage you to visit our website periodically to participate in discussions there among others who are/or have been addicted to tobacco. This is one way you, as a graduate, can help others.

This ends our supportive relationship with you. Congratulations on your successful journey! We wish you God's continued rich blessing on your life and your health.

Offer Prayer,

Bye