

<b>Policy Title:</b>	Tobacco Freedom Policy				
<b>Policy Number:</b>	XX-XXX-XXX	<b>Version:</b>	2.0	<b>Effective Date:</b>	1/01/2013

Approved By: *(Authorized Signer Name)*

Date Approved

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## Overview

**Description:** It is the policy of the Addictions and Mental Health Division (AMH) that all residential programs licensed and funded by AMH be tobacco free. The Tobacco Freedom Policy describes requirements for tobacco-free facilities that comply with all applicable Oregon Administrative Rules (OAR), Oregon Revised Statutes (ORS) and federal regulations. The policy also includes guidelines to establish tobacco cessation and education resources for both staff and individuals receiving services, including the integration of tobacco cessation into treatment planning.

It is also the policy of AMH that individuals receiving services are given the opportunity to make informed choices about tobacco use and that those choosing to use tobacco off-site of program grounds are not subject to punitive actions. Additionally, providers shall develop a policy to address the use and possession of tobacco and tobacco products while individuals are in treatment. The policy will be explained to all individuals at the time of entry to the program.

**Purpose:** The purpose of the Tobacco Freedom Policy is to:

- Provide individuals receiving AMH services and program employees with tobacco-free environments.
- Promote healthy alternatives to using tobacco.
- Increase access to peer-based and other tobacco cessation resources and supports.
- Improve discharge planning to promote sustained tobacco cessation and healthy lifestyles in recovery.

### **Rationale:**

On average, people with addiction and/or mental health diagnoses are dying 25 years earlier. In many cases, these early deaths can be attributed to cardiovascular disease resulting from high blood pressure, elevated blood cholesterol and triglycerides, metabolic disorders, and other cardiovascular risk factors hastened by tobacco use. People with addiction and/or mental

health diagnoses purchase almost half of the cigarettes consumed in this country. To address this startling disparity, the policy establishes tobacco-free treatment settings where individuals can access tobacco cessation supports.

As part of the Oregon Health Authority, AMH promotes and supports healthy treatment environments. The AMH Tobacco Freedom Policy is a step toward assisting individuals to achieve personal health and wellness. Research shows that there are significantly higher sustained recovery rates for individuals receiving addiction treatment when those individuals quit using tobacco during treatment. Tobacco-free grounds, education, peer supports and cessation resources contribute to sustained freedom from tobacco and its negative health effects.

**Applicability:** This policy is applicable to individuals receiving services, visitors, and staff in all AMH licensed and funded residential addiction treatment programs, and all AMH licensed and funded adult mental health residential treatment programs. This includes Residential Treatment Homes (RTH), Residential Treatment Facilities (RTF), Secure Residential Treatment Facilities (SRTF), all Oregon State Hospital Campuses and Blue Mountain Recovery Center.

Providers of Adult Foster Care Homes and Supported Housing programs are required to comply with the Oregon Indoor Clean Air Act (ORS 433.835 – 433.990) as applicable; however all providers are also strongly encouraged to adopt this policy.

**"This policy is not intended to restrict the use of traditional, sacred tobacco by tribal agencies."** 333-015-0035(6) Smoking of noncommercial tobacco products for ceremonial purposes is permitted in spaces designated for traditional ceremonies in accordance with the American Indian Religious Freedom Act, 42 U.S.C. 1996.

#### **Failure to Comply:**

1. Providers failing to comply with this policy will be subject to findings and corrective actions as specified in OAR 309-035-0100 through 0500, and 309-032-1500 through 1565 and any applicable contracts with AMH.
2. Guidelines for providers to address non-compliance on facility grounds are as follows:
  - a. Staff who encounter anyone using tobacco on facility grounds will politely explain the policy and report the violation to his/her immediate supervisor.
  - b. If a violation involves an individual receiving services, responsible staff will review the circumstances and determine the appropriate resources to be offered to the individual, consistent with the current Individual Service and Support Plan (ISSP) and/or Residential Services Plan, as applicable.
  - c. In the event of repeated non-compliance, staff will document attempts to verbally remind the individual of the policy and document adjustments to service plans, as needed, to support the individual in complying with the policy.

## Policy

1. Effective January 1, 2012, all AMH services and supports will include tobacco cessation resources and supports as specified in 5(a).
2. Effective January 1, 2013, all staff, individuals receiving services, volunteers and visitors shall not use tobacco in any form (including cigarettes, electronic cigarettes, cigars, pipes, smokeless tobacco or any other form of tobacco) in the interior space of programs licensed and funded by AMH, or on the outside property or grounds of programs licensed and funded by AMH, including parking areas and private vehicles parked on program grounds. Providers who are experiencing serious barriers to implementation can submit a "Request for Extension" indicating a proposed strategy for addressing barriers and an expected timeline that is no later than July 1, 2013. *See "procedures" below.*
3. AMH will support providers in the implementation of this policy by assisting with tobacco cessation resources including education, toolkits, Quit Line materials and other technical assistance as available.
4. Staff may not provide tobacco products for the purpose of providing incentives, nor withhold tobacco products from individuals as a consequence.
5. Providers will develop and implement policies and procedures to ensure the following:
  - a. Resources and supports for tobacco cessation are available in accordance with each individual's needs, including:
    - A. Screening and assessment, treatment planning and residential service planning;
    - B. Ongoing engagement and promotion of healthy lifestyle choices and wellness;
    - C. Peer support including peer wellness coaches where available;
    - D. Evidence-based practices in tobacco cessation education, treatment and replacement therapy;
    - E. Communication and collaboration with primary care physicians regarding effects of withdrawal and other health care considerations; and
    - F. Discharge planning and resources to support sustained tobacco cessation.
  - b. Personnel:
    - A. Providers will offer orientation training for staff, volunteers and contractors that includes an overview of the facilities policies and procedures and any applicable responsibilities to implement the policy;
    - B. Providers will offer staff resources for tobacco cessation; and
    - C. Procedures for addressing staff tobacco use on the premises will be consistent with the provider's disciplinary policies for personnel.
  - c. Communication:

- A. Providers will notify all program referral sources of this policy by letter annually;
- B. Providers will inform each individual receiving services of this policy as part of the entry and admission process. In residential programs, house rules will specify that no tobacco shall be used anywhere on facility grounds;
- C. Staff will inform all visitors of the program's policy at the time of arrival and through the use of signs posted on the property;
- D. All staff, including contractors and volunteers, will receive a copy of the program's policy; and
- E. Providers will post signs indicating that the program grounds are tobacco-free, both inside and outside of the program grounds.

### **Procedures that Apply:**

Request for Extension of Policy Implementation:

1. Providers experiencing serious barriers to implementation may submit a "Request for Extension" form to AMH.
2. The request must indicate the specific barriers, proposed strategies for addressing the barriers, staff responsible, and a date for implementation of tobacco-free grounds that is no later than July 1, 2013.
3. The request can be e-mailed or mailed to LuAnn Meulink, Tobacco Freedom Project Manager, at [luann.e.meulink@state.or.us](mailto:luann.e.meulink@state.or.us) or 500 Summer Street, NE, E-86, Salem, Oregon, 9301-1118.
4. Requests must be received no later than January 1, 2013.
5. AMH will respond to all requests no later than February 1, 2013.
6. Requests will be approved if they meet the following criteria:
  - a. The identified barrier(s) to implementation directly impact the health and safety of individuals, or a specific individual residing in the program.
  - b. The nature of the barrier(s) must be clearly explained.
  - c. The request is accompanied by a plan for addressing the barrier(s) within a time frame that allows for full implementation no later than July 1, 2013.

### **Forms that Apply:**

Request for Extension

### **Definition(s):**

Provider: An organizational entity, or qualified person, that is operated by or contractually affiliated with, a community mental health program, or contracted directly with the Division, for the direct delivery of addictions, problem gambling or mental health services and supports.

Evidence-based Practices: Those practices for which there is consistent scientific evidence that they produce positive outcomes. AMH approved Evidence-based practices for tobacco cessation include Nicotine Replacement Therapy (NRT), Commit to Quit, Oregon Quit Line, California Smoker's Helpline and Enough Snuff.

Tobacco Cessation: The medical term for the process of quitting the use of tobacco in any form.

Tobacco-free: Tobacco, in any form, is neither smoked nor ingested on the grounds of any program funded and licensed by OHA.

## Resources:

“Tobacco-Free Living in Psychiatric Settings: A Best Practices Toolkit Promoting Wellness and Recovery” (National Association of State Mental Health Program Directors (NASMHPD), July 2007)

AMH Tobacco Freedom Website: <http://www.oregon.gov/DHS/addiction/tobacco-freedom/main.shtml>

AMH Evidence-based Practices Website:  
<http://www.oregon.gov/DHS/mentalhealth/ebp/main.shtml>

## Reference(s):

- AMH Oregon Administrative Rules (OAR) 309-035-0100 through 309-035-0500 “Residential Treatment Programs”
- AMH OAR 309-032-1500 through 1565 “Integrated Services and Supports Rule”
- Department of Human Services (DHS) OAR 333-015-0025 through 333-015-0085 “Smoke free Workplace”
- Department of Administrative Services (DAS) OAR 105-050-0000 through 105-050-0006 “Smoke free Workplace”
- Oregon Indoor Clean Air Act (Oregon Revised Statute (ORS) 433.835 through 433.990)

## Contact(s):

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## Policy History:

- **Version 1.0:**