

Tobacco-Free Policy

Mission:

The USE NO MORE Addiction Treatment Center provides alcohol and other drug addiction treatment and recovery services for adults. The USE NO MORE ATC is dedicated to providing quality services in a healthy, drug-free environment.

In 1988, the U.S. Public Health Service under Surgeon General C. Everett Koop published the landmark report, The Health Consequences of Smoking: Nicotine Addiction. In this report, Dr. Koop states, “smoking is the chief avoidable cause of death in our society.” He indicates that nicotine is the substance in tobacco that causes addiction. Nicotine is a mood-altering, psychoactive substance which is highly addictive. Since 1980, the DSM (Diagnostic and Statistical Manual of Mental Disorders) has listed both Nicotine Withdrawal and Nicotine Dependence as diagnosable conditions. Further, in 1993, the Environmental Protection Agency (EPA) classified environmental tobacco smoke (ETS) as the highest level of carcinogens: a Class A (human) carcinogen. There is no safe level of exposure to ETS.

These facts about tobacco/nicotine impact the USE NO MORE ATC in several specific ways. First, the USE NO MORE ATC is aware that many of its patients receiving chemical dependency treatment currently use tobacco products. Others begin using tobacco in treatment, either for the first time or through relapse. Second, the USE NO MORE ATC recognizes that tobacco smoke at this facility is a dangerous pollutant which harms non-smokers and smokers alike. Third, the USE NO MORE ATC recognizes that tobacco is a psychoactive, mood-altering, addictive substance. The USE NO MORE ATC’s mission is to provide comprehensive treatment for all chemical dependencies. The USE NO MORE ATC does not permit the use of any non-prescribed psychoactive or mood-altering substances, including alcohol, during work hours. It is in keeping with the USE NO MORE ATC’s mission to adopt a tobacco-free policy: one that comprehensively deals with tobacco use, tobacco smoke pollution and nicotine dependence treatment.

Goal: To reduce addiction, illness and death caused by tobacco products.

Objectives:

1. To provide a healthy environment for staff, patients, volunteers and visitors; one that is free from tobacco smoke pollution and cues to use tobacco products.
2. To establish a tobacco-free treatment program including tobacco-free grounds.
3. To provide quality, state-of-the-art, comprehensive addiction treatment services to the community.

4. To provide nicotine dependence recovery assistance/options to staff.
5. To include nicotine dependence as a specific concern within the treatment offered the patients of the USE NO MORE ATC through assessment, education, prevention, treatment and continuing care.

GUIDELINES AND PROCEDURES:

The following policy was implemented on 10-1-96 and applies to all employees, patients, volunteers, visitors, departments and programs of the USE NO MORE ATC.

1. Establish a Tobacco-Free Facility

- A. All patients will be informed of this policy as part of the admission process and will sign a written contract at that time.
- B. Effective 10-1-96, all prospective employees will be notified of this policy in employment announcements, during their first interview, prior to hire, and during orientation.
- C. Referral sources were notified of this policy by 9-20-96 and will continue to be notified on an ongoing basis thereafter.
- D. All current staff and volunteers will receive a copy of the final policy. All new staff and volunteers will be notified of this policy at orientation.

2. Provide Tobacco/Nicotine Dependence Education and Recovery Options for Staff

- A. All staff have been asked to complete a confidential, anonymous questionnaire on tobacco/nicotine issues.
- B. All staff, including clinical, non-clinical and administrative personnel, will attend at least one mandatory education session, of no less than one hour, on the medical complications of tobacco use and nicotine dependence.
- C. All clinical staff will be offered training on how to manage and treat nicotine dependence. The program will refine the overall treatment/management methodology for addictions used at the USE NO MORE ATC so that it includes assessment, education, treatment planning and continuing care of nicotine dependence.
- D. All staff and volunteers who use tobacco are encouraged to take advantage of one or more of the following recovery options:

1. Free pamphlets, brochures, literature
 2. Nicotine Anonymous meetings
 3. Over-the-counter nicotine replacement
 4. Counseling through EAP referral
 5. Discussion of other resources for treatment.
- E. As of 10-1-96, all staff are prohibited from using tobacco products during work hours, which includes no evidence of tobacco use. Evidence of tobacco use includes visibly carrying tobacco products or paraphernalia and smelling of tobacco or tobacco smoke.

3. Provide Tobacco/Nicotine Prevention, Education and Treatment for Patients

- A. Prospective patients will be informed of tobacco-free policy during admission process beginning 9-15-95. Beginning with patients to be in residence after 10-1-96, they will be reminded not to bring any tobacco products or paraphernalia with them since these will be confiscated beginning 10-1-96.
- B. Clinical staff will assess for nicotine dependence at the time of admission. Nicotine dependence will be diagnosed, documented and included on the treatment plan, and tobacco/nicotine education groups will be provided.
- C. During the admission process, all patients will sign an agreement stating that they have been informed of the smoke/tobacco-free policy and understand its guidelines. All patients in residence on 10-1-96 will also sign this agreement.
- D. All patients, regardless of tobacco use history, will participate in educational seminars on the medical complications of tobacco, nicotine addiction and recovery with offers of assistance/referral made at each meeting.
- E. Adjunctive and complimentary therapies will be provided in accordance with the program's treatment philosophy and practice (e.g., nicotine replacement, relaxation training, etc.).
- F. Patients going out to support group meetings will attend only those that are smoke-free. When such meetings are not available, the program will encourage the establishment of them.
- G. When the program becomes tobacco-free for patients on 10-1-96, all tobacco products and paraphernalia will be removed from patients' possession; from that date, family members/visitors will not be permitted to bring tobacco products to the facility.

MONITORING AND COMPLIANCE:

1. All employees, patients, volunteers and visitors are expected to adhere to this policy.
2. All employees are expected to be familiar with this policy and are responsible for monitoring compliance.
3. Employees who violate this policy will be subject to the same disciplinary procedures used for any other policy violation related to work performance.
4. Violation of this policy by patients will be addressed as a treatment issue first, and as a disciplinary issue if violations persist. The treatment staff will address non-compliance with the patient. Repeated violations may result in termination guided by the way staff deals with other addictions.
5. Visitors who violate this policy will be informed of the policy and asked to comply. A visitor who persists in violating this policy will be asked to leave.
6. Volunteers who violate this policy will be reminded of the policy and asked to comply. A volunteer who persists in violating the policy will be relieved of duty until that volunteer agrees to comply.

EVALUATION:

1. A confidential and anonymous employee questionnaire assessing tobacco/nicotine use and attitudes has been distributed to all employees prior to implementation. Another questionnaire will be redistributed six months following implementation. Feedback will be solicited and monitored from the professional staff.
2. The management team will evaluate the policy at least quarterly.

DEFINITIONS:

Smoke-free Those facilities that adhere to clean indoor air laws and move smoking outdoors either in designated smoking areas or simply outside of the building. “Smoke-Free” does not demonstrate the integration of nicotine dependence treatment into the treatment of chemical dependency. Staff and patients continue to engage in the active use of the drug nicotine, through the use of cigarettes, pipe, cigar, or smokeless tobacco.

SAMPLE
ADDICTION TREATMENT CENTER
POLICY AND PROCEDURE MANUAL

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Tobacco-Free	Those facilities that integrate the education, assessment and treatment of nicotine dependence into their treatment program. Tobacco-free means banning of the use of all tobacco products on the grounds of the facility. “Tobacco-free” is a comprehensive approach to the management of nicotine dependence. However, tobacco-free allows for the use of adjunctive medicines such as the patch and gum to be utilized in the management of nicotine withdrawal.
Nicotine-free	Those facilities that philosophically do not incorporate the use of drugs in the treatment of addiction and do not allow of the use of adjuncts such as the nicotine patch or gum in the treatment of nicotine dependence.
“No evidence of tobacco use by staff during work hours”	A policy similar to policies employed by the chemical dependency treatment community regarding the use of alcohol and other drugs during work hours. As a facility/program that treats chemical dependency, a policy of “no evidence of tobacco use during work hours” reflects the understanding that the integrity and credibility of the facility is challenged if any employee shows evidence of use of the very chemical(s) for which patients are receiving treatment. There is no assumption that any employee is dependent on mood-altering chemicals under this policy. The policy asserts that, while an employee is working for the program, he or she must show no evidence of use of alcohol, tobacco, or other drugs and must in no way compromise the integrity of the treatment program. This includes not visibly carrying, using, or smelling of tobacco products or paraphernalia.