



PURPOSE

To ensure patients / clients who are admitted to Bay of Plenty District Health Board (BOPDHB) Mental Health & Addiction Services (MH&AS) inpatient units are screened for smoking risk and offered brief advice and support to quit tobacco use.

STANDARDS TO BE MET

1. On admission to BOPDHB MH&AS inpatient units patients must receive the ABCs of smoking cessation (refer protocol 0) as per policy 5.4.2. Consider the use of interpreters of patients who do not speak English as a first language.
2. Patients must be informed that BOPDHB hospitals, vehicles and grounds are smokefree as per policy 5.4.2 protocol 1 Smokefree - Facilities Standards.
3. Recommend Nicotine Replacement Therapy (NRT) to manage tobacco withdrawal (faster acting products such as gum, lozenges or inhalator may be preferred initially). Instruct the patient on how to use the product.
 - 3.1 Provide Smoking Cessation ABC intervention.
 - 3.2 QuitCards may be issued for 8 to 12 weeks supply of subsidised NRT (up to \$5 per product type, depending on patient's prescription subsidy card status)
 - 3.3 Recommend a referral to a cessation provider or General Practitioner (GP)
 - 3.4 Document as per usual ward / unit practice:
 - a) Smokefree Assessment & Treatment form
4. **Management of patients who insist on smoking – open ward**
 - 4.1 No smoking is permitted in any areas inside or outside the buildings by patients, staff or visitors
 - 4.2 Patients should be strongly encouraged to use nicotine replacement products to assist them to reduce the amount that they are smoking. Intermittent-use products (inhalator, gum or lozenge) may be preferred however patches can also be used as a reduction tool.
 - 4.3 Patients may retain possession of their cigarettes / tobacco and lighters with the exception of:
 - a) People with known risk factors e.g. arson or self-harm
 - b) Those who have previously smoked in non-designated areas e.g. bedroom, toilet
 - c) Those who smoke excessively due to their mental state
 - d) People who are intimidated by others seeking their tobacco supply
 - 4.4 Cigarettes and lighters that are held will be stored in the cabinet in the Nurses Office, and items will be labelled with patients' name
 - 4.5 It is the responsibility of staff to familiarise themselves with policy 5.4.2 protocol 5 Smokefree - Nicotine Dependence, and to ensure that their practice incorporates the standards outlined at the earliest appropriate point in the patient's recovery journey
 - 4.6 Staff should encourage patient participation in formal therapeutic programmes and weekend activities as a means of offsetting boredom and thereby reducing tobacco consumption
 - 4.7 Tobacco or smoking must not be used as a reward or privilege for behaviour management.
 - 4.8 Patients must be reassessed regularly and offered cessation support (NRT or other stop smoking pharmacotherapy and Referral) as their mental health stabilises.

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- 4.9 An employee may choose to consider accompanying a patient outside only if significant risk to the patient's immediate health or safety is present and the patient has declined the above actions to pursue cessation of tobacco use. The employee is to take positive action to protect themselves from exposure to exhaled tobacco smoke if accompanying a patient off site to smoke. This includes covering uniform and positioning themselves at a safe distance from the smoking patient / client.
- 4.10 Employees who smoke are not permitted to smoke themselves when accompanying a patient off site to smoke as this contravenes employee responsibility to provide healthy role modelling.
- 4.11 Mental Health & Addiction Services clients may require psychiatric drug dosage adjustments when they stop smoking. For information about specific drugs see page 20-21 of the [Background and Recommendations of the NZ Guidelines for Helping People to Stop Smoking, 2014](#)
- 5. Management of patients within Intensive Psychiatric Care (IPC)**
- 5.1 Cigarettes and lighters are to be held by staff and to be labelled with the patient's name
- 5.2 Use of nicotine replacement therapy medications by patients in IPC is supported by Senior Medical staff. Nursing staff should liaise with the Psychiatric Registrar or House Officer, to secure a prescription for administration on admission.
- 6. Management of patients on discharge who chose to commence cessation therapy**
- 6.1 Offer patient referral to Community Cessation Provider.
- 6.2 Notify patient's caseworker and GP of commencement of cessation therapy to monitor the effect on medication.

REFERENCES

- [NZ Guidelines for Helping People to Stop Smoking, 2014](#)
- Smoke-free Environments Act 1990, amended 2003
- [Health & Safety at Work Act 2015](#)
- [Background and Recommendations of the NZ Guidelines for Helping People to Stop Smoking, 2014](#)

ASSOCIATED DOCUMENTS

- Bay of Plenty District Health Board policy 5.4.2 Smokefree / Auahi Kore
- Bay of Plenty District Health Board policy 5.4.2 protocol 0 Smokefree – Smoking Cessation ABC's
- Bay of Plenty District Health Board policy 5.4.2 protocol 1 Smokefree - Facilities Standards
- Bay of Plenty District Health Board policy 5.4.2 protocol 2 Smokefree – Employee and Contractor Standards
- Bay of Plenty District Health Board policy 5.4.2 protocol 4 Smokefree – Inpatient Standards
- Bay of Plenty District Health Board policy 5.4.2 protocol 5 Smokefree – Management of Nicotine Dependence
- Bay of Plenty District Health Board Medication Practice Manual protocol MED.N2.1 Nicotine Dependence Therapy - Inhalator

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SMOKEFREE PROTOCOL

- Bay of Plenty District Health Board Medication Practice Manual protocol MED.N2.2 Nicotine Dependence Therapy - Gum, Lozenge, Patch
- Bay of Plenty District Health Board Medication Practice Manual protocol MED.N2.3 Nicotine Dependence Therapy - Tablets (Bupropion Hydrochloride)
- Bay of Plenty District Health Board Medication Practice Manual protocol MED.N2.4 Nicotine Dependence Therapy - Tablets (Nortriptyline)
- Bay of Plenty District Health Board Medication Practice Manual protocol MED.N2.5 Nicotine Dependence Therapy - Tablets (Varenicline as Tartrate)
- Bay of Plenty District Health Board policy 1.3.1 Complaints Management
- Bay of Plenty District Health Board policy 1.5.1 Interpreter Services
- Bay of Plenty District Health Board policy 3.50.02 protocol 9 Investigation Process
- Bay of Plenty District Health Board policy 3.50.02 Protocol 15 Disciplinary Process
- Bay of Plenty District Health Board policy 5.1.6 Transport – BOPDHB Fleet Vehicle
- Bay of Plenty District Health Board Reportable Event form
- Bay of Plenty District Health Board Form FM.R4.6 Referral Smokefree Community

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