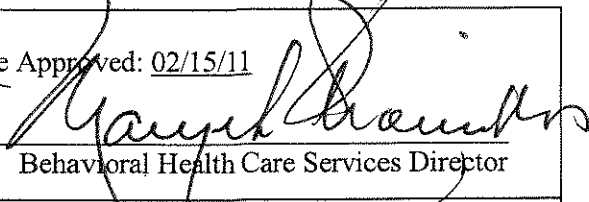


Alameda County Behavioral Health Care Services	Date Approved: <u>02/15/11</u> By:  Behavioral Health Care Services Director
POLICY: Alameda County Behavioral Health Care Services (ACBHCS) - Provider Tobacco Policies and Consumer Treatment Protocols	Policy No.:

**POLICY: Alameda County Behavioral Health Care Services (ACBHCS) - Provider Tobacco Policies and Consumer Treatment Protocols**

In order to reduce the currently existing 25-year mortality gap amongst the seriously mentally ill (SMI), and wholeheartedly support the SAMHSA 10x10 Wellness Campaign (to increase life expectancy by 10 years for those with SMI), Alameda County Behavioral Health Care Services is committed to addressing and treating tobacco dependence in all our programs. The following Provider Tobacco Policies and Consumer Treatment Protocols are intended to prevent and reduce tobacco-related diseases among consumers. They are also intended to protect clients and staff who do not smoke, to prevent non-smoking clients from starting to smoke or to relapse, to support providers who offer tobacco dependence treatment services, and finally, to underpin the new BHCS Co-Occurring Initiative which includes tobacco-use as a co-occurring condition

These Tobacco Policies replace the Tobacco Control, Education and Prevention Guidelines of 2003, and are designed as a framework for agencies to implement tobacco-free environments and systems that support comprehensive tobacco dependence treatment interventions and services for consumers, as well as to prevent exposure to secondhand smoke and reduce tobacco-use by BHCS staff.

- Tobacco’s addictive component, nicotine, produces these three mental health disorders noted in the DSM IV TR: Nicotine dependence, nicotine withdrawal, and nicotine-related disorder not otherwise specified.
- Tobacco-related diseases are the number one cause of preventable death in the US. Tobacco-related diseases are the number one cause of death for substance use and mental health populations.
- Consumers with mental health, substance use and, those with co-occurring conditions smoke at significantly higher rates (60-90%) than the general population. In California, the smoking rate is 13%. Our consumer population is currently greatly underserved in receiving tobacco dependence treatment services on par with other BHCS and healthcare treatment services.
- Tobacco dependence is an addiction like all others that can significantly interfere with clients’ ability to recover and live a healthy life.
- Nationally recognized agencies such as SAMHSA, the U.S. Public Health Service and the National Association of State Mental Health Program Directors (NASMHPD), have all published documents that recommend aggressive tobacco dependence treatment for patients with mental health and substance use conditions. These documents include *SAMHSA TIP 42, USPHS Guidelines for Tobacco Dependence Treatment, 2008* and *the NASMHPD Tobacco Free Toolkit, 2006*.
- According to the USPHS’ Tobacco Dependence Update 2008, tobacco dependence treatment does not interfere with patients’ recovery from the use of other substances. Furthermore, there is evidence that tobacco treatment in substance use treatment increases abstinence rate at one year by 25 percent (Prochaska 2004).

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- Evidence shows that tobacco-free environments help people to quit smoking and reduce the rate of heart attacks.
- New York and New Jersey have implemented statewide policies that mandate tobacco dependence treatment on par with alcohol and other drug treatment services.

Additionally, these tobacco policies are in keeping with BHCS mission to provide the best quality of care for our consumers. This includes integrated alcohol, tobacco, and other drug and mental health services, as well as support for the new Co-Occurring Initiative. This initiative is designed to provide a welcoming environment for consumers to easily enter our system and receive all the necessary treatment and rehabilitative services they need in order to recover from their disease and re-enter the community whenever possible.

**Attachments:**

ACBHCS Provider Tobacco Policies and Consumer Treatment Protocols and Appendix