

## **ACBHCS Tobacco Control, Education and Prevention Guidelines**

The Alameda County Behavioral Health Care Services is committed to the prevention of tobacco-related diseases. These Guidelines are designed to reduce environmental tobacco smoke exposure and consumption by this Department's staff and clients.

These Guidelines provide a general direction for moving toward tobacco free environments and developing a supportive environment for clients and staff to quit smoking. They do not seek to detract a service provider from making clinical judgements based on an individualized assessment of each client's needs, readiness, and service priorities. As stated in the American Psychiatric Association's Practice Guideline for the Treatment of Patients with Nicotine Dependence, "the ultimate judgement regarding a particular clinical procedure or treatment plan must be made by the (clinician) on the basis of the clinical data presented by the patient..." These Guidelines are further intended to be implemented in accordance with all applicable County Ordinances, laws, regulations and contractual obligations respecting the individual rights of clients and staff.

**Unless a service organization submits an approved alternative policy, EACH SERVICE ORGANIZATION FUNDED THROUGH ACBHCS WILL...**

### **TRAINING**

- **offer one annual training** of at least one hour in length to all staff regarding basic tobacco related health education, secondhand smoke and these guidelines. The training will use materials provided by the Alameda County Tobacco Control Coalition, among others. The training will include information about smoking cessation, referrals and information about related programs and classes.
- **include training for clinical staff on how nicotine addiction is treated**, as a basis for making referrals and/or directly providing tobacco treatment services
- **engage trainers who are familiar with both** the American Psychiatric Association's Practice Guidelines for the Treatment of Patients with Nicotine Dependence and the Centers for Disease Control and Prevention's clinical practice guideline, Treating Tobacco Use and Dependence, to the extent that these guidelines are relevant to the training content.

### **PROHIBITIONS**

- **prohibit use of tobacco products** (24 hours a day, seven days a week), in agency vehicles, buildings, and property, unless there is a compelling civil rights, contractual, clinical, or other compelling reason to exclude designated vehicles, buildings, property or portions of buildings or property from such a prohibition.
  - During the phase-in of comprehensive agency-wide policies, smoking by clients will be in designated areas only and no smoking by staff within sight of clients, if staff smoking is permitted.

- **prohibit smoking within a minimum of 15 feet** (or greater distance if a local ordinance has a greater distance) of doors, windows and air intake structures.
- **implement these prohibitions by...**
  - **clearly informing** all staff and clients of the policy
  - **orienting** all new staff to the policy
  - **addressing violations in supervisory sessions** with staff
  - **recording an established pattern of repeat violations** in the employee's personnel record
  - **instituting sanctions** consistent with sanctions used when staff fail to comply with other established health and safety policies of the organization;
  - **prominently posting the full set of prohibitions** where all staff and clients may see it; the telephone number [(510) 268-STOP] of the Alameda County Public Health Department - Tobacco Control Program will be included for reports of violations that can't be effectively addressed by more direct, effective and collegial communications within the program.

### **PUBLIC INFORMATION**

- **prominently post “NO SMOKING” signs** at all entrances to buildings and in other appropriate areas. Each sign should include the Public Health Department's telephone number. (See above.)
- **inform employees of the extent to which their benefit plans** include coverage for smoking cessation and related pharmaceuticals.
- **advocate for non-discriminatory access** to tobacco cessation services in the community for persons with substance use disorders and other mental disorders.

### **DIVESTMENT**

- **sign certificates agreeing to divestment and refusal** of tobacco funds by a time designated by this Department (i.e. within 3 months of BHCS Indigent Plan implementation).
- **complete a form disclosing the extent, if any, of their investments** in tobacco stocks and/or bonds. This does not oblige service providers to investigate any company's ultimate relationships with tobacco producers.

### **OTHER CONSIDERATIONS**

- **expect clinical staff to routinely address use of ATOD** as it relates to each client's assessment, and to take appropriate action **as individually appropriate**
- **encourage no smoking by staff within sight of clients**, if smoking is permitted
- **be involved in tobacco dependence treatment of their clients** whenever the matter cannot be effectively treated in primary health care settings
- **note that some psychotropic drug levels are affected by tobacco use**
- provide encouragement and support to clients and staff who are engaged in tobacco cessation and other AOD recovery processes, as individually appropriate
- **encourage clients to be abstinent from tobacco use while in the service program** and attend tobacco education during their treatment and establish clear consequences for tobacco use in treatment, **as individually appropriate**