



Waitematā
District Health Board
Best Care for Everyone

DHB Board Office
15 Shea Terrace
Takapuna, Auckland 0622
Private Bag 93-503, Takapuna
North Shore City 0740
Telephone: 09 486 8900
Facsimile: 09 486 8924
www.waitematahnb.govt.nz

28 January 2020

Dear [REDACTED]

Re: OIA request – Smokefree policy

Thank you for your Official Information Act request received 13 December 2019 seeking information about Smokefree policies used at Waitematā District Health Board (DHB).

Before responding to your specific questions, it may be useful to provide some context about our services.

Waitematā DHB serves a population of more than 630,000 across North Shore, Waitakere and Rodney areas, the largest and one of the most rapidly growing DHBs in the country. We are the largest employer in the district, employing around 7,500 people across more than 80 different locations.

In addition to providing services to our own population, we are also the metropolitan Auckland provider of forensic psychiatry, child disability services, child community dental services and community alcohol and drug services.

In response to your request, we can provide the following information:

1. Smoke-free policies (tobacco) used by Waitematā DHB between and including the years 2000 – 2019.

Included with this letter as Appendix 1 is the current Smokefree policy as issued in November 2019, along with policies issued in:

January 2000
August 2001
January 2005
February 2006
November 2009
March 2013
November 2016

In addition, we have included the following:

Appendix 2	Smokefree Statement of Policy for Regional Forensic Psychiatry Services
Appendix 3	Nicotine Dependent Patient Guidelines
Appendix 4	Clinical Form P74006 Patient smoking status assessment
Appendix 5	General and maternal smokefree brochures.

2. Policies related to smoking (tobacco) used by the former Waitematā CHE and Health and Hospital Services (the provider entities) between and including the years 1993-1999.

There is no Smokefree policy information prior to 2000.

I trust that this information is helpful.

Waitematā DHB supports the open disclosure of information to assist community understanding of how we are delivering publicly funded healthcare. This includes the proactive publication of anonymised Official Information Act responses on our website from 10 working days after they have been released.

If you consider there are good reasons why this response should not be made publicly available, we will be happy to consider your views.

Yours sincerely



Robert Paine
Chief Financial Officer and Head of Corporate Services
Waitematā District Health Board

Smokefree Environment

Overview

This document

This document outlines WHL policy regarding smoking and maintenance of a smokefree environment.

Contents

This document contains the following topics

<u>Topic</u>	<u>See Page</u>
Introduction.....	2
General Policy	3
Staff smoking	3
Patient smoking	4

Smokefree Environment

Introduction

Purpose

The purpose of this policy is to ensure:

- the health and safety of all individuals within WHL premises
 - compliance with Smokefree Environment Act 1990
-

Scope

This policy applies to all:

- staff
- patients/clients/customers
- visitors
- contractors
- volunteers

using Waitemata Health premises.

Associated documents

This table below indicates other documents associated with this document:

Type	Document Title (s)
Legislation	Smokefree Environment Act 1990

Smokefree Environment

General Policy

Smoke-free environment

Smoking is a health hazard and can also be a fire risk. In order to comply with legislation and minimise risk, smoking in the building is to be eliminated. WHL is required to ensure that smoking and non-smoking employees and members of the public are, so far as is reasonably practicable, protected from tobacco smoke in the workplace.

No smoking is therefore permitted by anyone in Waitemata Health buildings, vehicles and offices.

This requirement may be waived in *exceptional circumstances* for named patients only and then only in specified areas with authorisation.

Tobacco Products

No tobacco products will be sold or advertised on Waitemata Health premises.

Removal from premises

Anyone not authorised to smoke in the building will be asked to leave the building. Security will be called if necessary.

Education

Health promotion is a strong focus of our vision. Patient information will promote smoking cessation as appropriate.

Staff smoking

Smoking areas

Staff may only smoke well away from:

- buildings
- main entrances

so that non-smokers are not passing through smoke filled areas.

Staff are advised to use the designated ventilated 'Smoking Areas' on the lower ground floor, before the kitchen area.

Timing

Staff may only smoke outside during recognised breaks and away from the main public entrances.

Smokefree Environment

Patient smoking

Pre-admission advice Waitemata Health recognises that some patients are dependent on tobacco products to such an extent that if they are not permitted to smoke, particularly when they are stressed by illness, their recovery may be delayed.

On admission, patients will be advised

- to give up smoking especially prior to elective admission
 - of the restrictions of this policy
-

In-patient behaviour In-patients at North Shore hospital may not smoke in the buildings UNLESS they have specific authorisation to do so.

Authorisation may only be given in *exceptional circumstances*.

Authorisation to smoke When given, authorisation to smoke:

- must be formally agreed by the nursing and medical team
- will only apply to a named patient who is incapacitated as to be unable to move readily or to be moved readily

Authorised smoking Authorised smoking may occur

- only in an appropriately ventilated specified area which will not affect anyone else
- in areas that are not a risk to others or near oxygen or stored oxygen cylinders

Alternatives Patients may be offered nicotine patches to inhibit craving to smoke.

Mental health patients Mental Health patients in secure areas will follow in-house rules.

Smokefree Environment

Overview

This document This document outlines WDHB policy regarding smoking and maintenance of a smokefree environment.

Contents This document contains the following topics

<u>Topic</u>	<u>See Page</u>
Introduction.....	2
Policy.....	3
Staff smoking.....	4
Patient smoking.....	4

Smokefree Environment

Introduction

Purpose

The purpose of this policy is to ensure:

- the health and safety of all individuals within WDHB premises and environs
- compliance with Smokefree Environment Act 1990.

WDHB is required to ensure that smoking and non-smoking employees and members of the public are, so far as is reasonably practicable, protected from tobacco smoke in the workplace.

Scope

This policy applies to all:

- staff
- patients/clients/customers
- visitors
- contractors
- volunteers

using Waitemata DHB premises.

Associated documents

This table below indicates other documents associated with this document:

Type	Document Title (s)
Legislation	Smokefree Environment Act 1990

Smokefree Environment

Policy

Smoke-free environment

Smoking is a health hazard and can also be a fire risk. In order to comply with legislation and to minimise risk, smoking in the buildings is to be prohibited.

No smoking is permitted by anyone in Waitemata DHB buildings, vehicles and offices.

Anyone smoking must smoke outside and away from any public entrances. People entering and exiting premises must not be exposed to smoke.

This requirement may be waived in *exceptional circumstances* for named **patients** only who cannot leave the building to smoke and then they may only smoke in specified areas with specific authorisation.

Staff must leave the building if they wish to smoke.

Tobacco Products

No tobacco products will be sold or advertised on Waitemata DHB premises.

Action is smoking in building

Anyone not authorised to smoke in the building will be asked to leave the building if smoking. Security will be called if necessary.

Education

Health promotion is a strong focus of our vision. Patient information will be available to promote smoking cessation as appropriate.

Continued on next page

Smokefree Environment

Policy, Continued

Staff smoking

Smoking areas Staff must move well away from buildings and main entrances if they wish to smoke. They may not smoke near entrances or office windows as smoke may affect those in the adjacent areas.

Timing Staff may only smoke outside during recognised breaks.

Patient smoking

Pre-admission advice Waitemata DHB recognises that some patients are dependent on tobacco products to such an extent that if they are not permitted to smoke, particularly when they are stressed by illness, their recovery may be delayed.

On admission, patients will be advised

- to give up smoking especially prior to elective admission
 - of the restrictions of this policy
-

In-patient behaviour In-patients at North Shore hospital may not smoke in the buildings **UNLESS** they have specific authorisation to do so, and the in ***exceptional circumstances***.

It is **not** routine practice to use the patient smokers area on the third floor at North Shore Hospital. If patients are using this area they must let the nurse know where they are going. Visitors may **not** smoke in this area.

Authorisation to smoke When given, authorisation to smoke:

- must be formally agreed by the nursing and medical team
- will only apply to a named patient who is incapacitated as to be unable to move readily or to be moved readily outside.

Continued on next page

Smokefree Environment

Policy, Continued

Authorised smoking

Authorised smoking may occur

- only in an appropriately ventilated specified area which will not affect anyone else
 - in areas that are not a risk to others or near oxygen or stored oxygen cylinders.
-

Alternatives

Patients may be offered nicotine patches to inhibit craving to smoke.

Mental health patients

Mental Health patients in secure areas will follow in-house rules.

Smokefree Environment

This page intentionally blank

Smokefree Environment

Overview

This document

This document outlines Waitemata District Health Board (WDHB) policy regarding smoking and maintenance of a smokefree environment.

Contents

This document contains the following topics

<u>Topic</u>	<u>See Page</u>
Introduction.....	2
Policy.....	3

Smokefree Environment

Introduction

Purpose

The purpose of this policy is to outline the expectations as regards:

- the health and safety of all individuals within WDHB premises and environs
- compliance with Smoke-free Environments Act 1990 and amendments 2003 and the Health & Safety in Employment Act 1992 and amendments 2002.

WDHB is required to ensure that employees and members of the public are protected from tobacco smoke in the workplace. As part of its wider role in promoting health and wellbeing, WDHB has a responsibility to encourage and support patients and staff not to smoke.

Scope

This policy applies to all using WDHB premises:

- staff
 - patients/clients/customers
 - visitors
 - contractors
 - volunteers
-

Associated documents

This table below indicates other documents associated with this document.

Type	Document Titles
Legislation	Smoke-free Environments Act 1990 and amendments 2003 Health and Safety in Employment Act 1992 and amendments 2002
Guide	Staff guide to OSH policy and operating procedures – Smoke-free Environments Act 1990. Validated date: 17/11/04

Smokefree Environment

Policy

Smokefree environment

All WDHB sites will be smokefree from 22 February 2005.

No smoking is permitted by anyone **inside** WDHB buildings, vehicles and offices, including in any areas leased by Waitemata DHB in buildings not owned by them.

Staff, patients and visitors may NOT smoke in a public area **outside** on any site owned by WDHB or controlled by them under a lease arrangement. They must leave the site if they wish to smoke.

Limited exceptions apply for mental health inpatients in mental health units and patients who require security, watch or nurse escort to ensure their safety for psychological or behavioural reasons. These patients may smoke:

- in any dedicated smoking room; or
- outside in a designated smoking area

Tobacco Products

No tobacco products may be sold on any Waitemata DHB premises.

Action if smoking observed in any public area

WDHB employees are encouraged to inform patients and visitors who smoke on-site, that WDHB is smokefree on all sites and that, smokers must go off-site to smoke.

Staff who breach the smokefree policy may be subject to the WDHB disciplinary processes.

Education

Health promotion is a strong focus of our vision. Patient information will be available to promote smoking cessation as appropriate.

Continued on next page

Smokefree Environment

Policy, Continued

**Support for
those wishing
to quit
smoking**

WDHB offers support for those staff and patients wishing to quit smoking.

Staff may approach Occupational Health & Safety for education, support and access to options.

General Medical patients who have been assessed as ready to quit to be referred to the Smoking Cessation Service.

Smokefree Environment

Overview

This document

This document outlines Waitemata District Health Board (WDHB) policy regarding tobacco smoking and maintenance of a smokefree environment.

Contents

This document contains the following topics

<u>Topic</u>	<u>See Page</u>
Introduction.....	2
Policy.....	3
Vision for the Future	6

Smokefree Environment

Introduction

Purpose

The purpose of this policy is to outline the expectations as regards:

- the health and safety of all individuals within WDHB premises and environs and;
- compliance with Smoke-free Environments Act 1990 and Amendments 2003 and the Health & Safety in Employment Act 1992 and Amendments 2002.

WDHB is required to ensure that employees and members of the public are protected from tobacco smoke in the workplace. As part of its wider role in promoting health and wellbeing, WDHB has a responsibility to encourage and support patients and staff not to smoke.

Scope

This policy applies to all individuals using WDHB premises, including:

- staff
 - patients/clients/customers
 - visitors
 - contractors
 - volunteers
-

Associated documents

This table below indicates other documents associated with this document:

Type	Title/Description
Legislation	Smoke-free Environments Act 1990 and Amendments 2003 Health and Safety in Employment Act 1992 and Amendments 2002
Guide	Staff guide to OSH policy and operating procedures – Smoke-free Environments Act 1990. Validated date: 17/11/04
WDHB Policy	Discipline and Dismissal

Smokefree Environment

Policy

Smokefree environment

All WDHB sites are smokefree.

No smoking is permitted by anyone **inside** WDHB buildings, vehicles and offices, including in any buildings leased by Waitemata DHB.

Staff, patients and visitors may NOT smoke in **external** areas on any site owned by WDHB or controlled by them under a lease arrangement. They must leave the site if they wish to smoke. On-site includes boundary fences, gardens and entrances to sites.

Staff who wish to smoke off-site must not be identifiable as WDHB staff by their uniforms or name tags.

A limited exception may apply for mental health inpatients in mental health units. They may only smoke:

- in a dedicated smoking room; or
- outside in a designated smoking area

Tobacco Products

No tobacco products may be sold on any Waitemata DHB premises.

No staff member or volunteer will accept gifts or donations of tobacco products from organisations or charities.

Staff may not purchase tobacco products on behalf of patients or supply tobacco products to patients. An exception to this rule will apply in secure mental health units when clients are unable to purchase tobacco products for themselves.

Staff non-compliance

Non-compliance by staff with this policy is considered misconduct and will be treated in accordance with the WDHB Discipline & Dismissal Policy. Repeated breaches of the Smokefree Policy will be considered serious misconduct and may result in dismissal.

Continued on next page

Smokefree Environment

Policy, Continued

Staff non-compliance, Continued

RC Managers are responsible for discussing and addressing non-compliance with their staff member/s in accordance with the WDHB Discipline & Dismissal Policy. This process will be supported by the Service General Manager and the Service Human Resources Manager.

Where security staff observe staff breaching the Smokefree Policy, they may request the name and area of work of the staff member. The staff member must provide their staff ID for inspection by the security staff. This information will be reported to the Service General Manager and Service Human Resources Manager. Refusal to provide their ID will be considered serious misconduct and will be treated in accordance with the WDHB Discipline & Dismissal Policy.

Staff should not enter into any debate with security staff regarding the WDHB Smokefree Policy. Any issues or concerns should be addressed with their immediate manager or the CEO.

Patient & visitor non-compliance

Security staff will inform and assist with the enforcement of the WDHB Smokefree Policy however it is the responsibility of all staff to inform patients and visitors who are found to be smoking on-site that WDHB is smokefree on all sites and that smokers must go off-site to smoke.

Patients and visitors who continue to smoke after being asked to go off-site will be warned that further failure to stop smoking on-site may result in their being asked to leave under the Trespass Act 1980.

If Security is considering issuing a Trespass notice, they will contact the relevant General Manager to discuss and, if appropriate, obtain permission to issue a Trespass Notice. Where a Trespass Order is placed on an individual, this must be done in accordance with the relevant WDHB policy and procedure.

The clinical staff responsible for a patient's care are also responsible for ensuring that the Smokefree Policy is discussed with patients on admission to hospital or presentation to clinics. Clinical staff must also advise patients of appropriate alternatives during their hospitalisation.

Continued on next page

Smokefree Environment

Policy, Continued

Health promotion and education

Health promotion is a strong focus of the WDHB vision. As well as promoting smokefree throughout WDHB, information on smoking cessation and smoke change support will be made available by all WDHB services for patients and staff.

Support for those wishing to quit smoking

WDHB offers support for those staff and patients wishing to quit smoking as follows:

- Occupational Health & Safety provide a smoking cessation service for staff who wish to quit smoking.
 - General Medical patients who have been assessed as ready to quit should be referred to the Smoking Cessation Service.
 - Pregnant women, their families and parents of child patients may be referred to Smokechange for support to quit smoking.
 - All other patients can be referred to the Quitline, regional or local smoking cessation services. For further information on these services contact the Smoking Cessation Service.
-

Smokefree Environment

Vision for the Future

Smokefree Systems

The three DHBs across the Auckland region (namely Auckland, Counties Manukau and Waitemata) have committed to smokefree systems. WDHB has made an initial commitment to smokefree systems and will ensure that by 2006:

- All patients who smoke or are exposed to smoke in the home will be identified.
- All frontline health staff will be offered training in effective brief intervention for smoking cessation / smoke change.
- All patients who smoke or are exposed to smoke in the home will receive frequent and brief interventions for smoking cessation / smoke change.
- Dedicated smokefree services will be established.

Smokefree Mental Health Services

Mental health services will work towards smokefree services by 2010.

Smokefree Environment

Overview

This document This document outlines Waitemata District Health Board (WDHB) policy regarding tobacco smoking and maintenance of a smokefree environment.

Contents This document contains the following topics

<u>Topic</u>	<u>See Page</u>
Introduction.....	1
Policy.....	2
Smokefree environment.....	2
Staff non-compliance	2
Patient & visitor non-compliance.....	3
Support for those wishing to quit smoking.....	4

Introduction

Purpose Confirms WDHB compliance with Smoke-free Environments Act 1990 and Amendments 2003 and the Health & Safety in Employment Act 1992 and Amendments 2002.

Scope This policy applies to all individuals using WDHB premises, including:

- staff
- patients/clients/customers
- visitors
- contractors
- volunteers

Associated documents This table below indicates other documents associated with this document:

Type	Title/Description
Legislation	Smoke-free Environments Act 1990 and Amendments 2003 Health and Safety in Employment Act 1992 and Amendments 2002
Guide	Staff guide to OSH policy and operating procedures – Smoke-free Environments Act 1990. Validated date: 17/11/04
WDHB Policy	Discipline and Dismissal Nicotine Dependent Patient Guidelines

Smokefree Environment

Policy

WDHB is required to ensure that employees, patients and members of the public are protected from tobacco smoke in the workplace.

- WDHB has a responsibility to encourage and support patients and staff not to smoke.
-

Smokefree environment

All WDHB sites are smokefree.

No smoking is permitted by anyone **inside** WDHB buildings, vehicles and offices, including in any buildings/vehicles leased by Waitemata DHB.

Staff, patients and visitors may NOT smoke in **external** areas on any site owned by WDHB or controlled by them under a lease arrangement. They must leave the site if they wish to smoke. On-site includes boundary fences, gardens and entrances to sites.

Staff who smoke off-site must not be identifiable as WDHB staff by their uniforms or name tags.

Tobacco Products

No tobacco products may be sold on any Waitemata DHB premises.

No staff member or volunteer will accept gifts or donations of tobacco products from organisations or charities.

Staff may not purchase tobacco products on behalf of patients or supply tobacco products to patients.

Staff non-compliance

Non-compliance by staff with this policy is considered misconduct and will be treated in accordance with the WDHB Discipline & Dismissal Policy.

- Repeated breaches of the Smokefree Policy will be considered serious misconduct and may result in dismissal.
-

Continued on next page

Smokefree Environment

Policy, Continued

Staff non-compliance, Continued

Team managers are responsible for discussing and addressing non-compliance with their staff member/s in accordance with the WDHB Discipline & Dismissal Policy. This process will be supported by the General Manager and Human Resources Manager.

Where security staff observe staff breaching the Smokefree Policy, they may request the name and area of work of the staff member. The staff member must provide their staff ID for inspection by the security staff. This information will be reported to the General Manager and Human Resources Manager. Refusal to provide their ID will be considered serious misconduct and will be treated in accordance with the WDHB Discipline & Dismissal Policy.

Staff should not enter into any debate with security staff regarding the WDHB Smokefree Policy. Any issues or concerns should be addressed with their immediate manager or the CEO.

Patient & visitor non-compliance

Security staff will inform and assist with the enforcement of the WDHB Smokefree Policy. However it is the responsibility of all staff to inform patients and visitors who are found to be smoking on-site that WDHB is smokefree on all sites and that smokers must go off-site to smoke.

Patients and visitors who continue to smoke after being asked to go off-site will be warned that further failure to stop smoking on-site may result in their being asked to leave under the Trespass Act 1980.

If Security is considering issuing a Trespass notice, they will contact the relevant General Manager to discuss and, if appropriate, obtain permission to issue a Trespass Notice. Where a Trespass Order is placed on an individual, this must be done in accordance with the relevant WDHB policy and procedure.

The clinical staff responsible for a patient's care are also responsible for ensuring that the Smokefree Policy is discussed with patients on admission to hospital or presentation to clinics. Clinical staff must also advise patients of appropriate alternatives during their hospitalisation.

Continued on next page

Smokefree Environment

Policy, Continued

Health promotion and education

Health promotion is a strong focus of the WDHB vision. As well as promoting smokefree throughout WDHB, information on smoking cessation and smoke change support will be made available by all WDHB services for patients and staff.

Support for those wishing to quit smoking

WDHB staff are proactive in offering support to staff and patients to quit smoking:

- Patients assessed as a smoker are provided with health promotion advice, prescribed nicotine replacement and referred to the Smoking Cessation Service.
 - Pregnant women, their families and parents of child patients are referred to Smokechange for support to quit smoking.
 - Visitors and patients are referred to the Quitline, regional or local smoking cessation services.
 - Occupational Health & Safety provide a smoking cessation service for staff who wish to quit smoking.
-

Smokefree Systems

- Frontline health staff are provided with training in effective brief intervention for smoking cessation / smoke change.
- Patients who smoke or are exposed to smoke in the home receive frequent and brief interventions for smoking cessation / smoke change.
- Dedicated smokefree services are established in the district.

Smokefree Environment

Contents

1.	Overview	1
1.1	Purpose.....	1
1.2	Scope.....	1
2.	Introduction.....	1
2.1	Policy Rationale.....	1
3.	Policy.....	2
3.1	Smokefree Environment.....	2
3.2	Tobacco Products.....	2
3.3	Employee Compliance	2
3.4	Smokefree Support – Employees.....	3
3.5	Patient and Visitor Compliance.....	3
3.6	Smokefree Support – Patients	4
4.	Associated Documents.....	4

1. Overview

This document establishes Waitemata District Health Board's (WDHB's) policy regarding tobacco products and the maintenance of a smokefree environment.

1.1 Purpose

To enable Waitemata DHB to comply with the requirement of Smokefree Environments Act 1990 and Amendments 2003 and the Health & Safety in Employment Act 1992 and Amendments 2002.

Health and wellbeing promotion sits within the DHB's wider strategic context. Waitemata DHB has a responsibility to encourage and support patients, visitors and employees not to smoke and to provide healthy, smokefree environments for all patients, visitors and employees.

1.2 Scope

This policy applies to all individuals using WDHB premise, vehicles owned or occupied by WDHB and WDHB sponsored event, including:

- All WDHB employees
- Patients/clients/customers
- Visitors
- Contractors
- Volunteers

2. Introduction

2.1 Policy Rationale

Tobacco-related illnesses are the leading cause of preventable death in New Zealand, resulting in approximately 5000 deaths each year.

Issued by	Operations Manager	Issued Date	March 2013	Classification	01001-05-001
Authorised by	Group HR Manager	Review Period	36 mths	Page	1 of 4

This information is correct at date of issue. Always check on Waitemata DHB Controlled Documents site that this is the most recent version.

Smokefree Environment

As a health authority Waitemata DHB is committed to providing a healthy environment for everyone who accesses our facilities and services. This includes eliminating exposure to the harmful health effects of second-hand smoke.

Waitemata DHB is also obligated to provide a safe and healthy environment for patients, visitors and employees and the DHB cannot fulfill this requirement if people smoke onsite.

3. Policy

3.1 Smokefree Environment

All Waitemata DHB sites are smokefree.

Smoking is not permitted in any Waitemata DHB buildings or vehicles, including any offices or buildings leased by Waitemata DHB. Patients, visitors and employees are also not permitted to smoke in external areas on any site owned by Waitemata DHB or controlled by Waitemata DHB under a lease agreement.

All smokers must leave the DHB site if they wish to smoke. On-site includes boundary fences, gardens and entrances to DHB sites.

Waitemata DHB employees who smoke off-site must not be identifiable as WDHB staff by their uniforms or name tags.

3.2 Tobacco Products

Tobacco products may not be sold on any Waitemata DHB premises.

Employees or volunteers are not permitted to accept gifts or donations of tobacco products from any organisations or charities.

Employees may not purchase tobacco products on behalf of patients or supply tobacco products to patients.

E-cigarettes are not to be used on Waitemata DHB premises as the use of such products runs contrary to the strategies currently in place which promote smokefree living.

3.3 Employee Compliance

Failure to comply with Waitemata DHB Smokefree Policy may be considered misconduct and considered liable for disciplinary action in accordance with the WDHB Discipline & Dismissal Policy.

If any DHB employee observes another member of staff breaching Waitemata DHB's Smokefree Policy, they are expected to convey the message to that employee that Waitemata DHB is a smokefree environment and that they need to smoke off-site. They are then expected to report the conversation to the direct line manager of the employee observed smoking on-site. Information reported to the line-manager should include the following:

- Name of employee
- Time, date and location of incident
- Additional information regarding content of discussion with employee

Issued by	Operations Manager	Issued Date	March 2013	Classification	01001-05-001
Authorised by	Group HR Manager	Review Period	36 mths	Page	2 of 4

This information is correct at date of issue. Always check on Waitemata DHB Controlled Documents site that this is the most recent version.

Smokefree Environment

When an employee breach is identified by a member of the Traffic or Security Teams, the incident should be reported through the Human Resource (HR) inbox. In addition to the information detailed above, the report should also include the Traffic or Security team member involved with the breach. HR will refer the notification of the incident to the Line Manager of the employee.

The following steps must be taken for all reported breaches of Waitemata Smokefree Policy:

- The Line Manager is to have an informal discussion with the employee(s) concerned.
- The Line Manager is to check the employee's awareness of the Smokefree Environment Policy and clarify expectations and the potential seriousness of a breach of these expectations.
- The Line Manager is to offer the assistance and support of the Staff Cessation Service.
- The Line Manager is to make notes of the discussion.

Employees who are finding difficulty abiding by the Smokefree policy expectations should pro-actively contact their Line Manager or appropriate person for assistance.

3.4 Smokefree Support - Employees

21mg nicotine patches and 2mg nicotine lozenges are available in first aid box available for employees. These products are for periodic/unanticipated use only – they are not intended to be used to support a quit smoking attempt.

A free confidential quit smoking support service is available to all Waitemata DHB staff. Further information is available on the 'Smokefree Staff Intranet' site.

3.5 Patient and Visitor Compliance

It is the responsibility of all employees to ensure compliance with the policy.

Security staff will assist with the enforcement of the Smokefree Policy. The key responsibility of Security however, is to help ensure the safety of everyone on Waitemata DHB property. The Security team have limited resources to perform their role and the responsible for conversations with smokers is everyone's.

Employees are not expected to take time away from their duties to help enforce smokefree policies. Employees are simply expected to advise anyone who they notice smoking that smoking is not permitted on hospital grounds and direct them to the nearest boundary.

Employees are not expected to get involved in any situation likely to lead to verbal or physical abuse. Security staff should be contacted if there are concerns about personal safety due to an aggressive response to being asked to smoke off-site.

Clinical staff responsible for a patient's care must ensure that Waitemata DHB's Smokefree Policy is discussed with patients on admission to hospital or presentation to clinics. Clinical staff must also advise patients of appropriate alternatives to smoking during their hospitalisation.

Clinical staff should inform patients of any contraindications to their treatment regime if they insist on leaving the ward/facility to smoke.

Issued by	Operations Manager	Issued Date	March 2013	Classification	01001-05-001
Authorised by	Group HR Manager	Review Period	36 mths	Page	3 of 4

This information is correct at date of issue. Always check on Waitemata DHB Controlled Documents site that this is the most recent version.

Smokefree Environment

Any patients using portable oxygen devices must not be permitted to smoke. There are significant risks associated with smoking in the vicinity of oxygen and Security should be informed of any non-compliance.

Under no circumstances is it acceptable for any member of staff to sanction smoking on Waitemata DHB grounds.

3.6 Smokefree Support - Patients

The support offered to smokers in Waitemata is amongst the best in the country. This policy is intended to strike a greater balance between an individual's right to smoke and the community's right to visit and work in a hospital with a healthy, smokefree environment.

While not every smoker wants to quit smoking, most will still benefit from advice and support to quit. The preferred approach is to encourage all patients to use NRT (or an alternative pharmacotherapy) to manage the unpleasant physical withdrawal symptoms associated with nicotine dependence; particularly for patients that are so unwell they are required to be accompanied by a clinical staff member.

Employees who are qualified to offer medication should do so. At a minimum, employees involved in a patients care should make an offer of treatment (e.g. "if you like I can help you stop smoking, and I can tell you about a number of treatment options") and provide advice on the various no-cost support options available. This should be followed up by a referral to an appropriate support service if required. Referrals can be made using the 'ATM – Smokefree Support & Referral' form. Mental Health and Addictions Services will routinely use the Smokefree Assessment form in HCC for every entry and exit from their respective services.

4. Associated Documents

Type	Title/Description
Legislation	Smoke-free Environments Act 1990 and Amendments 2003 Health and Safety in Employment Act 1992 and Amendments 2002
WDHB Policy / Guidelines	<ul style="list-style-type: none"> • Discipline and Dismissal • Uniform and Presentation Standards • Communication & Presentation Standards • WDHB Smoking Cessation Practitioner • Smoking Cessation Support • Security Service Protocol for North Shore Hospital & Waitakere Hospitals • Health, Safety & Wellbeing Policy

Issued by	Operations Manager	Issued Date	March 2013	Classification	01001-05-001
Authorised by	Group HR Manager	Review Period	36 mths	Page	4 of 4

This information is correct at date of issue. Always check on Waitemata DHB Controlled Documents site that this is the most recent version.

Smokefree Environment

Contents

1.	Overview	1
1.1	Purpose.....	1
1.2	Scope.....	1
2.	Introduction.....	1
2.1	Policy Rationale.....	1
3.	Policy.....	2
3.1	Smokefree Environment.....	2
3.2	Tobacco Products.....	2
3.3	Employee Compliance	2
3.4	Smokefree Support – Employees.....	3
3.5	Patient and Visitor Compliance.....	3
3.6	Smokefree Support – Patients	4
4.	Associated Documents.....	4

1. Overview

This document establishes Waitemata District Health Board’s (WDHB’s) policy regarding tobacco products and the maintenance of a smokefree environment.

1.1 Purpose

To enable Waitemata DHB to comply with the requirement of Smokefree Environments Act 1990 and Amendments 2003 and the Health & Safety in Employment Act 1992 and Amendments 2002.

Health and wellbeing promotion sits within the DHB’s wider strategic context. Waitemata DHB has a responsibility to encourage and support patients, visitors and employees not to smoke and to provide healthy, smokefree environments for all patients, visitors and employees.

1.2 Scope

This policy applies to all individuals using WDHB premise, vehicles owned or occupied by WDHB and WDHB sponsored event, including:

- All WDHB employees
- Patients/clients/customers
- Visitors
- Contractors
- Volunteers

2. Introduction

2.1 Policy Rationale

Tobacco-related illnesses are the leading cause of preventable death in New Zealand, resulting in approximately 5000 deaths each year.

As a health authority Waitemata DHB is committed to providing a healthy environment for everyone who accesses our facilities and services. This includes eliminating exposure to the harmful health effects of second-hand smoke.

Issued by	Operations Manager	Issued Date	November 2016	Classification	01001-05-001
Authorised by	Group HR Manager	Review Period	36 mths	Page	1 of 4

This information is correct at date of issue. Always check on Waitemata DHB Controlled Documents site that this is the most recent version.

Smokefree Environment

Waitemata DHB is also obligated to provide a safe and healthy environment for patients, visitors and employees and the DHB cannot fulfill this requirement if people smoke onsite.

3. Policy

3.1 Smokefree Environment

All Waitemata DHB sites are smokefree.

Smoking is not permitted in any Waitemata DHB buildings or vehicles, including any offices or buildings leased by Waitemata DHB. Patients, visitors and employees are also not permitted to smoke in external areas on any site owned by Waitemata DHB or controlled by Waitemata DHB under a lease agreement.

All smokers must leave the DHB site if they wish to smoke. On-site includes boundary fences, gardens and entrances to DHB sites.

Waitemata DHB employees who smoke off-site must not be identifiable as WDHB staff by their uniforms or name tags.

3.2 Tobacco Products

Tobacco products may not be sold on any Waitemata DHB premises.

Employees or volunteers are not permitted to accept gifts or donations of tobacco products from any organisations or charities.

Employees may not purchase tobacco products on behalf of patients or supply tobacco products to patients.

E-cigarettes are not to be used on Waitemata DHB premises as the use of such products runs contrary to the strategies currently in place which promote smokefree living.

3.3 Employee Compliance

Failure to comply with Waitemata DHB Smokefree Policy may be considered misconduct and considered liable for disciplinary action in accordance with the WDHB Discipline & Dismissal Policy.

If any DHB employee observes another member of staff breaching Waitemata DHB's Smokefree Policy, they are expected to convey the message to that employee that Waitemata DHB is a smokefree environment and that they need to smoke off-site. They are then expected to report the conversation to the direct line manager of the employee observed smoking on-site. Information reported to the line-manager should include the following:

- Name of employee
- Time, date and location of incident
- Additional information regarding content of discussion with employee

When an employee breach is identified by a member of the Traffic or Security Teams, the incident should be reported through the Human Resource (HR) inbox. In addition to the information detailed above, the report should also include the Traffic or Security team member involved with the breach. HR will refer the notification of the incident to the Line Manager of the employee.

Issued by	Operations Manager	Issued Date	November 2016	Classification	01001-05-001
Authorised by	Group HR Manager	Review Period	36 mths	Page	2 of 4

Smokefree Environment

The following steps must be taken for all reported breaches of Waitemata Smokefree Policy:

- The Line Manager is to have an informal discussion with the employee(s) concerned.
- The Line Manager is to check the employee's awareness of the Smokefree Environment Policy and clarify expectations and the potential seriousness of a breach of these expectations.
- The Line Manager is to offer the assistance and support of the Staff Cessation Service.
- The Line Manager is to make notes of the discussion.

Employees who are finding difficulty abiding by the Smokefree policy expectations should pro-actively contact their Line Manager or appropriate person for assistance.

3.4 Smokefree Support - Employees

21mg nicotine patches and 2mg nicotine lozenges are available in first aid box available for employees. These products are for periodic/unanticipated use only – they are not intended to be used to support a quit smoking attempt.

A free confidential quit smoking support service is available to all Waitemata DHB staff. Further information is available on the 'Smokefree Staff Intranet' site.

3.5 Patient and Visitor Compliance

It is the responsibility of all employees to ensure compliance with the policy.

Security staff will assist with the enforcement of the Smokefree Policy. The key responsibility of Security however, is to help ensure the safety of everyone on Waitemata DHB property. The Security team have limited resources to perform their role and the responsible for conversations with smokers is everyone's.

Employees are not expected to take time away from their duties to help enforce smokefree policies. Employees are simply expected to advise anyone who they notice smoking that smoking is not permitted on hospital grounds and direct them to the nearest boundary.

Employees are not expected to get involved in any situation likely to lead to verbal or physical abuse. Security staff should be contacted if there are concerns about personal safety due to an aggressive response to being asked to smoke off-site.

Clinical staff responsible for a patient's care must ensure that Waitemata DHB's Smokefree Policy is discussed with patients on admission to hospital or presentation to clinics. Clinical staff must also advise patients of appropriate alternatives to smoking during their hospitalisation.

Clinical staff should inform patients of any contraindications to their treatment regime if they insist on leaving the ward/facility to smoke.

Any patients using portable oxygen devices must not be permitted to smoke. There are significant risks associated with smoking in the vicinity of oxygen and Security should be informed of any non-compliance.

Under no circumstances is it acceptable for any member of staff to sanction smoking on Waitemata DHB grounds.

Issued by	Operations Manager	Issued Date	November 2016	Classification	01001-05-001
Authorised by	Group HR Manager	Review Period	36 mths	Page	3 of 4

Smokefree Environment

3.6 Smokefree Support - Patients

The support offered to smokers in Waitemata is amongst the best in the country. This policy is intended to strike a greater balance between an individual's right to smoke and the community's right to visit and work in a hospital with a healthy, smokefree environment.

While not every smoker wants to quit smoking, most will still benefit from advice and support to quit. The preferred approach is to encourage all patients to use NRT (or an alternative pharmacotherapy) to manage the unpleasant physical withdrawal symptoms associated with nicotine dependence; particularly for patients that are so unwell they are required to be accompanied by a clinical staff member.

Employees who are qualified to offer medication should do so. At a minimum, employees involved in a patients care should make an offer of treatment (e.g. "if you like I can help you stop smoking, and I can tell you about a number of treatment options") and provide advice on the various no-cost support options available. This should be followed up by a referral to an appropriate support service if required. Referrals can be made using the 'ATM – Smokefree Support & Referral' form. Mental Health and Addictions Services will routinely use the Smokefree Assessment form in HCC for every entry and exit from their respective services.

4. Associated Documents

Type	Title/Description
Legislation	Smoke-free Environments Act 1990 and Amendments 2003 Health and Safety in Employment Act 1992 and Amendments 2002
WDHB Policy / Guidelines	<ul style="list-style-type: none"> • Discipline and Dismissal • Uniform and Presentation Standards • Communication & Presentation Standards • WDHB Smoking Cessation Practitioner • Smoking Cessation Support • Security Service Protocol for North Shore Hospital & Waitakere Hospitals • Health, Safety & Wellbeing Policy

Issued by	Operations Manager	Issued Date	November 2016	Classification	01001-05-001
Authorised by	Group HR Manager	Review Period	36 mths	Page	4 of 4

This information is correct at date of issue. Always check on Waitemata DHB Controlled Documents site that this is the most recent version.

Smokefree Environment

Contents

1.	Overview	1
1.1	Purpose.....	1
1.2	Scope.....	1
2.	Introduction.....	1
2.1	Policy Rationale.....	1
3.	Policy.....	2
3.1	Smokefree Environment.....	2
3.2	Tobacco Products.....	2
3.3	Employee Compliance	2
3.4	Smokefree Support – Employees.....	3
3.5	Patient and Visitor Compliance.....	3
3.6	Smokefree Support – Patients	4
4.	Associated Documents.....	4

1. Overview

This document establishes Waitemata District Health Board’s (WDHB’s) policy regarding tobacco products and the maintenance of a smokefree environment.

1.1 Purpose

To enable Waitemata DHB to comply with the requirement of Smokefree Environments Act 1990 and Amendments 2003 and the Health & Safety in Employment Act 1992 and Amendments 2002.

Health and wellbeing promotion sits within the DHB’s wider strategic context. Waitemata DHB has a responsibility to encourage and support patients, visitors and employees not to smoke and to provide healthy, smokefree environments for all patients, visitors and employees.

1.2 Scope

This policy applies to all individuals using WDHB premise, vehicles owned or occupied by WDHB and WDHB sponsored event, including:

- All WDHB employees
- Patients/clients/customers
- Visitors
- Contractors
- Volunteers

2. Introduction

2.1 Policy Rationale

Tobacco-related illnesses are the leading cause of preventable death in New Zealand, resulting in approximately 5000 deaths each year.

As a health authority Waitemata DHB is committed to providing a healthy environment for everyone who accesses our facilities and services. This includes eliminating exposure to the harmful health effects of second-hand smoke.

Issued by	Operations Manager	Issued Date	November 2019	Classification	01001-05-001
Authorised by	Group HR Manager	Review Period	6 mths	Page	1 of 4

This information is correct at date of issue. Always check on Waitemata DHB Controlled Documents site that this is the most recent version.

Smokefree Environment

Waitemata DHB is also obligated to provide a safe and healthy environment for patients, visitors and employees and the DHB cannot fulfill this requirement if people smoke onsite.

3. Policy

3.1 Smokefree Environment

All Waitemata DHB sites are smokefree.

Smoking is not permitted in any Waitemata DHB buildings or vehicles, including any offices or buildings leased by Waitemata DHB. Patients, visitors and employees are also not permitted to smoke in external areas on any site owned by Waitemata DHB or controlled by Waitemata DHB under a lease agreement.

All smokers must leave the DHB site if they wish to smoke. On-site includes boundary fences, gardens and entrances to DHB sites.

Waitemata DHB employees who smoke off-site must not be identifiable as WDHB staff by their uniforms or name tags.

3.2 Tobacco Products

Tobacco products may not be sold on any Waitemata DHB premises.

Employees or volunteers are not permitted to accept gifts or donations of tobacco products from any organisations or charities.

Employees may not purchase tobacco products on behalf of patients or supply tobacco products to patients.

E-cigarettes are not to be used on Waitemata DHB premises as the use of such products runs contrary to the strategies currently in place which promote smokefree living.

3.3 Employee Compliance

Failure to comply with Waitemata DHB Smokefree Policy may be considered misconduct and considered liable for disciplinary action in accordance with the WDHB Discipline & Dismissal Policy.

If any DHB employee observes another member of staff breaching Waitemata DHB's Smokefree Policy, they are expected to convey the message to that employee that Waitemata DHB is a smokefree environment and that they need to smoke off-site. They are then expected to report the conversation to the direct line manager of the employee observed smoking on-site. Information reported to the line-manager should include the following:

- Name of employee
- Time, date and location of incident
- Additional information regarding content of discussion with employee

When an employee breach is identified by a member of the Traffic or Security Teams, the incident should be reported through the Human Resource (HR) inbox. In addition to the information detailed above, the report should also include the Traffic or Security team member involved with the breach. HR will refer the notification of the incident to the Line Manager of the employee.

Issued by	Operations Manager	Issued Date	November 2019	Classification	01001-05-001
Authorised by	Group HR Manager	Review Period	6 mths	Page	2 of 4

Smokefree Environment

The following steps must be taken for all reported breaches of Waitemata Smokefree Policy:

- The Line Manager is to have an informal discussion with the employee(s) concerned.
- The Line Manager is to check the employee's awareness of the Smokefree Environment Policy and clarify expectations and the potential seriousness of a breach of these expectations.
- The Line Manager is to offer the assistance and support of the Staff Cessation Service.
- The Line Manager is to make notes of the discussion.

Employees who are finding difficulty abiding by the Smokefree policy expectations should pro-actively contact their Line Manager or appropriate person for assistance.

3.4 Smokefree Support - Employees

21mg nicotine patches and 2mg nicotine lozenges are available in first aid box available for employees. These products are for periodic/unanticipated use only – they are not intended to be used to support a quit smoking attempt.

A free confidential quit smoking support service is available to all Waitemata DHB staff. Further information is available on the 'Smokefree Staff Intranet' site.

3.5 Patient and Visitor Compliance

It is the responsibility of all employees to ensure compliance with the policy.

Security staff will assist with the enforcement of the Smokefree Policy. The key responsibility of Security however, is to help ensure the safety of everyone on Waitemata DHB property. The Security team have limited resources to perform their role and the responsible for conversations with smokers is everyone's.

Employees are not expected to take time away from their duties to help enforce smokefree policies. Employees are simply expected to advise anyone who they notice smoking that smoking is not permitted on hospital grounds and direct them to the nearest boundary.

Employees are not expected to get involved in any situation likely to lead to verbal or physical abuse. Security staff should be contacted if there are concerns about personal safety due to an aggressive response to being asked to smoke off-site.

Clinical staff responsible for a patient's care must ensure that Waitemata DHB's Smokefree Policy is discussed with patients on admission to hospital or presentation to clinics. Clinical staff must also advise patients of appropriate alternatives to smoking during their hospitalisation.

Clinical staff should inform patients of any contraindications to their treatment regime if they insist on leaving the ward/facility to smoke.

Any patients using portable oxygen devices must not be permitted to smoke. There are significant risks associated with smoking in the vicinity of oxygen and Security should be informed of any non-compliance.

Under no circumstances is it acceptable for any member of staff to sanction smoking on Waitemata DHB grounds.

Issued by	Operations Manager	Issued Date	November 2019	Classification	01001-05-001
Authorised by	Group HR Manager	Review Period	6 mths	Page	3 of 4

Smokefree Environment

3.6 Smokefree Support - Patients

The support offered to smokers in Waitemata is amongst the best in the country. This policy is intended to strike a greater balance between an individual's right to smoke and the community's right to visit and work in a hospital with a healthy, smokefree environment.

While not every smoker wants to quit smoking, most will still benefit from advice and support to quit. The preferred approach is to encourage all patients to use NRT (or an alternative pharmacotherapy) to manage the unpleasant physical withdrawal symptoms associated with nicotine dependence; particularly for patients that are so unwell they are required to be accompanied by a clinical staff member.

Employees who are qualified to offer medication should do so. At a minimum, employees involved in a patients care should make an offer of treatment (e.g. "if you like I can help you stop smoking, and I can tell you about a number of treatment options") and provide advice on the various no-cost support options available. This should be followed up by a referral to an appropriate support service if required. Referrals can be made using the 'ATM – Smokefree Support & Referral' form. Mental Health and Addictions Services will routinely use the Smokefree Assessment form in HCC for every entry and exit from their respective services.

4. Associated Documents

Type	Title/Description
Legislation	Smoke-free Environments Act 1990 and Amendments 2003 Health and Safety in Employment Act 1992 and Amendments 2002
WDHB Policy / Guidelines	<ul style="list-style-type: none"> • Discipline and Dismissal • Uniform and Presentation Standards • Communication & Presentation Standards • WDHB Smoking Cessation Practitioner • Smoking Cessation Support • Security Service Protocol for North Shore Hospital & Waitakere Hospitals • Health, Safety & Wellbeing Policy

Issued by	Operations Manager	Issued Date	November 2019	Classification	01001-05-001
Authorised by	Group HR Manager	Review Period	6 mths	Page	4 of 4

This information is correct at date of issue. Always check on Waitemata DHB Controlled Documents site that this is the most recent version.

Smokefree SOP

Introduction

Purpose	This document describes the policy and procedures of the Regional Forensic Psychiatry Services with regards the Smokefree Environment Act 1990.
Scope	All staff of the Regional Forensic Psychiatry Services who smoke.
Associated documents	Smokefree Environments Act, 1990
Rationale	The Waitemata District Health Board is committed to promoting a safe and healthy environment for staff and clients. The purpose of this policy is to protect non-smokers, or people who do not wish to smoke, from tobacco smoke in the environment.
Smokefree Environments Act 1990	All statements in this policy are subject to the provisions of the Smokefree Environments Act, 1990.
Visitors	No smoking is permitted by visitors in Waitemata Health's buildings, vehicles and offices.
Staff	No smoking is permitted by staff (including contractors) in Waitemata DHB buildings, vehicles and offices. Staff may smoke outside buildings during recognised breaks.

Continued on next page

Smokefree SOP

Introduction, Continued

Patients No smoking is permitted by patients in Waitemata DHB buildings, vehicles and offices. This section will be subject to Part 1, 6 (1) of the Smokefree Environment Act, 1990 'Special Provisions for Certain Institutions'.

Breach of policy Breach of policy will be subject to the usual procedures for complaints and disciplinary matters.

Review As required by the Smokefree Environments Act, 1990 this policy will be reviewed in consultation with employees (or a representative of employees) at least once a year.

Mason Clinic policy statement No smoking policy has been adopted by Mason Clinic as per New Zealand Government Smoke Free Policy Regulations.

There is to be no smoking throughout the Clinic, including corridors, bathrooms, etc except in the designated areas agree to.

These designated areas are as follows:

1. Smokers lounge off main dayrooms
2. Courtyards
3. Half of staff room as indicated by signs (applies to Kauri Unit only)

The safety and health of the other patients, visitors and staff will be considered over and above the needs of the smoker.

Nicotine Dependent Patient Guidelines

Contents

Overview	1
1. Introduction.....	1
1.1 Management.....	1
1.2 Cessation	2
1.3 Ask.....	2
1.4 Brief Cessation Advice	2
1.5 Cessation Support	2
2. Inpatient Management	2
2.1 Potential Withdrawal Symptoms	2
2.2 Nicotine Replacement Therapy (NRT)	3
2.3 Assessing Level of Nicotine Dependence.....	3
2.4 NRT use and Dosage.....	3
2.5 Prescribing NRT.....	3
2.6 NRT Standing Order.....	4
2.7 NRT and Special populations.....	4
2.8 NRT Flowchart.....	5
2.9 If the Patient insists on Smoking.....	5
2.10 Special Exemptions.....	5
3. Referring to Cessation Support Services	6
4. Alternatives to NRT	6
4.1 Bupropion (Zyban).....	6
4.2 Varenicline (Champix).....	6
4.3 Nortriptyline	6
4.4 E-cigarettes.....	6
5. The effect of stopping smoking on the metabolism of other drugs	7
Appendix 2 – Prescribing Information for NRT.....	8

Overview

This document establishes Waitematā District Health Board (WDHB) policy and protocol for managing withdrawal symptoms from nicotine in patients in all hospital settings, **excluding mental health**

Purpose

This policy incorporates the process of managing nicotine withdrawal and monitoring, recording, assessing, treating nicotine withdrawal in the nicotine dependent patient

Scope

These guidelines should be used for all smokers.

1. Introduction

1.1 Management

It is important to remember that although not every smoker wants to quit smoking, most will still benefit from using nicotine replacement therapy (NRT) to manage their withdrawal during an inpatient stay. All clinical staff should actively encourage patients to be smoke free. Nicotine replacement therapy (NRT) is an effective smoking cessation aid that reduces the urge to smoke and relieves other unpleasant tobacco withdrawal symptoms. It is therefore an appropriate treatment for the management of nicotine

Issued by	Hospital Smokefree Coordinator	Issued Date	September 2019	Classification	012-001-14-007
Authorised by	Pharmacy and Therapeutics Committee	Review Period	6 months	Page	1 of 8

This information is correct at date of issue. Always check on Waitemata DHB Controlled Documents site that this is the most recent version.

Nicotine Dependent Patient Guidelines

withdrawal. Irrelevant of their intention to quit, it is important to at least offer all smokers support, advice and NRT.

1.2 Cessation

Cessation advice can be structured around three steps in an easy memory aid – ABC.

- A – **Ask** about smoking status.
- B – Give **Brief** advice to all people who smoke.
- C – Provide evidence-based **Cessation** support for those who express a desire to stop smoking.

1.3 Ask

All health care workers, regardless of their location, specialty or seniority, are required to monitor and record the smoking status of patients. Patients should be asked if they currently smoke, have never smoked or have recently quit. This should be recorded in PiMS and via eVitals on the 'ATM – Smokefree Support & Referral' form and updated at each admission, or ED attendance.

1.4 Brief Cessation Advice

Brief advice simply means advising people who smoke to stop. It can be done in as short a time as 30 seconds and should be provided to all smokers irrespective of their readiness to quit. For more dependent smokers, it is important that brief advice is followed by a recommendation to use stop smoking medications and referral to a smoking cessation service. - Document via eVitals on the on the 'ATM – Smokefree Support & Referral' form or electronic discharge summary that advice was provided.

1.5 Cessation Support

Health professionals who are in a position to provide cessation advice & medication should do so. At the very least staff should make an offer of treatment and provide advice on the various no-cost support options available.

Referrals can be made using the ATM – Smokefree Support & Referral form or contact Smokefree Services EXTN 2462. Email Smokefreeservices@Waitematādhb.govt.nz

However, if a patient does not feel ready to make a commitment to stop smoking, make it clear that while you fully understand and accept their decision, they will not be permitted to smoke in hospital buildings or grounds

2. Inpatient Management

2.1 Potential Withdrawal Symptoms

Irritability	Poor concentration
Depression	Increased appetite
Urges to smoke	Sleep disturbance and Restlessness

NOTE

- *Withdrawal symptoms can be eased by using stop-smoking medicines and behavioural strategies.*
- *Withdrawal symptoms are common, but not every person gets every symptom*
- *Most withdrawal symptoms disappear within four weeks.*

All withdrawal symptoms observed or complained of by the patient should be documented in the patient's clinical record.

Issued by	Hospital Smokefree Coordinator	Issued Date	September 2019	Classification	012-001-14-007
Authorised by	Pharmacy and Therapeutics Committee	Review Period	6 months	Page	2 of 8

This information is correct at date of issue. Always check on Waitemata DHB Controlled Documents site that this is the most recent version.

Nicotine Dependent Patient Guidelines

2.2 Nicotine Replacement Therapy (NRT)

Nicotine replacement therapy (NRT) is a clinically effective way of managing nicotine withdrawal. It provides less nicotine less rapidly than cigarette smoking and unlike other tobacco smoke components, such as carbon monoxide, nicotine is not a significant risk factor for cardiovascular disease or acute cardiac events. It can therefore be used safely by almost all patients. The choice of NRT product can be guided by individual preference and include Transdermal Patches, Gum Lozenge and Inhalator. Gum and lozenge are oral products and have the advantage of fast, flexible delivery of nicotine as opposed to the slow, even delivery of patches. The Inhalator is for use by agitated patients who smoke and are unable to leave the hospital facilities and where other NRT options have been explored. It may be used in combination with other nicotine patches to further reduce the symptoms of nicotine withdrawal

2.3 Assessing Level of Nicotine Dependence

To assess someone's level of dependence, ask, 'How soon after you wake up do you usually have your first cigarette?' If the person smokes within 30 to 60 minutes of waking, then they have a higher degree of nicotine dependence and are likely to benefit from more intensive cessation support.

All smokers should be encouraged to maintain adequate levels of nicotine to manage withdrawal symptoms during hospitalization irrespective of their interest in quitting

2.4 NRT use and Dosage

- **21mg transdermal Patch or 4mg GUM or 2mg Lozenge** – suitable for most smokers, but particularly for those who usually smoke within 30 minutes of waking, and/or smoke more than 10 cigarettes per day.
- **Combination Therapy** – If the patient is still craving four hours after applying a nicotine patch it is **safe to** supplement with 4mg gum OR 2mg lozenge. Alternatively some smokers may prefer to start with an oral product and supplement with a nicotine patch if the cravings or withdrawal remain a concern.
- **14mg transdermal Patch or 2mg GUM or 1mg Lozenge** – can be used for less dependent smokers but assess within 24 hours and if the patient is still craving change to the 21mg patch OR 4mg gum OR 2mg lozenge.
- **15mg Nicotine Inhalator 15 mg** – 3 -6 cartridges per day, maximum of one cartridge every 3 hours. If the symptoms of nicotine withdrawal are severe, the Inhalator may be used in conjunction with one 21mg/24 hour Habitrol® patch. Once the seal is broken, each 15mg nicotine cartridge will last for a maximum of 4hrs depending on the amount and strength of inhalations.

There are no safety concerns in combining NRT products, although combination treatment is not normally recommended in pregnant women who smoke or smokers with unstable cardiovascular disease. Oral products such as lozenges and gum are recommended for this group of smokers.

2.5 Prescribing NRT

- In the inpatient setting, patches and lozenge are distributed through the Pyxis MedStation system. Other than in the Emergency Department and Acute Diagnostic Unit the Inhalator is not kept in Pyxis, and must be prescribed on the inpatient medicine chart or in MedChart and ordered from the Inpatient pharmacy

Subsidised NRT nicotine patches, gum and lozenges are funded on the presentation of either a prescription or a Quit Card. The Inhalator is not subsidised and will need to be purchased at full price on discharge. Prescriptions for NRT should be made for 8 week's treatment (i.e. 8 boxes of patches and gum or 12 boxes of lozenges).

Issued by	Hospital Smokefree Coordinator	Issued Date	September 2019	Classification	012-001-14-007
Authorised by	Pharmacy and Therapeutics Committee	Review Period	6 months	Page	3 of 8

Nicotine Dependent Patient Guidelines

Product & Dose Options

- 21mg nicotine patches x 8 weeks
- 14mg nicotine patches x 8 weeks
- 2mg nicotine lozenge x 12 boxes
- 1mg nicotine lozenge x 12 boxes
- 4mg nicotine gum x 8 boxes
- 2mg nicotine gum x 8 boxes

2.6 NRT Standing Order

21mg nicotine patches and 2mg nicotine lozenges may be administered by Registered Nurses employed by Waitematā District Health Board under standing order as an interim step until a prescription can be written by an authorised prescriber.

[See Nicotine Replacement Therapy – Standing Order \(Acute Inpatients\) *](#)

* Not available to bureau nurses or casual staff.

If any of the situations listed in the 'Contraindications' section apply, the nurse must consult with a doctor prior to implementing the standing order. Any specified outcomes (e.g. that the standing order must not be implemented for a specific patient, or any specific monitoring is required) must be documented in the patient's notes.

If a standing order is implemented, the responsible nurse must **make sure that the standing order is signed by a doctor within 24 hours.**

21mg Nicotine patch - The standing order must be documented on the 'NON REGULAR (PRN) MEDICATIONS' section of the medication chart as follows:

Medicine: Nicotine Patch 21mg Standing Order

Dose: 1 patch for nicotine withdrawal / 24 hours

Route: Transdermal

2mg Nicotine Lozenge - The standing order must be documented on the 'NON REGULAR (PRN) MEDICATIONS' section of the medication chart as follows:

Medicine: Nicotine Lozenge 2mg Standing Order

Dose: Suck 1 Lozenge for nicotine withdrawal. At least 60 minutes between doses: max 10 lozenge / 24hrs

Route: Buccal

The order will cease to be in effect when either the patient has been seen by a doctor and the NRT either stopped or signed on for continuation, or the patient moves to a non-smoke-free environment (i.e. is discharged / transferred).

2.7 NRT and Special populations

NRT can be provided to people with cardiovascular disease. However, where patients have suffered a serious cardiovascular event (for example, people who have had a myocardial infarction or stroke) in the past 2 weeks or have a poorly controlled disease, treatment should be discussed with their Consultant or Registrar beforehand

Although there is limited evidence of the effectiveness of NRT in helping pregnant women stop smoking, and some concern about potential adverse effects of nicotine on foetal development, NRT provides less nicotine and none of the toxins contained in tobacco smoke. Therefore, current expert opinion is that NRT can be considered safe to use in pregnancy following an assessment of the risks and benefits. In general,

Issued by	Hospital Smokefree Coordinator	Issued Date	September 2019	Classification	012-001-14-007
Authorised by	Pharmacy and Therapeutics Committee	Review Period	6 months	Page	4 of 8

This information is correct at date of issue. Always check on Waitemata DHB Controlled Documents site that this is the most recent version.

Nicotine Dependent Patient Guidelines

NRT products, such as gum, lozenges, sublingual tablets and inhalators, should be used in preference to patches as they deliver a lower total daily nicotine dose than patches. If a patch is used it should be removed at night

The Ministry of Health “Nicotine dependent Guidelines” suggest NRT can be used by young people (12-18 years of age) who are dependent on nicotine (that is, it is not recommended for occasional smokers such as those who smoke on weekends only) if it is believed that NRT may help them to stop smoking.

2.8 NRT Flowchart

A one page flowchart outlining the process for NRT assessment and dose can be found in Appendix 2.

2.9 If the Patient insists on Smoking

We have an ethical and professional responsibility to help all smokers in our care manage withdrawal without smoking and this should be our primary objective at all times. However, in the event of the patient insisting on smoking, staff are expected to inform patients of the WDHB Smokefree Policy. It is important to:

- Inform the patient that they would be required to go off-site unaided by a staff member.
- Ensure the patient is aware of the risk.
- Inform the patient that they must not smoke in the presence of enriched oxygen if they are using a portable oxygen device.
- Inform the Charge Nurse/Midwife Manager / Duty Manager of the situation and document in the patient notes.

2.10 Special Exemptions

Patients unable to leave WDHB ground unaided should be offered advice, unconditional support and encouraged to use NRT to manage withdrawal. However, if this fails to diffuse a potentially volatile situation, it should not be pursued at the expense of patient, visitor, or staff safety. Consequently, exemptions may apply to some smokers in exceptional ‘risk’ circumstances where there is demonstrable evidence that all other measures have been fully explored and failed.

Following an assessment of risk and need, staff should contact the Duty Manager to discuss the possibility of security staff escorting the patient to an outside area to smoke. However, given that security’s prime focus is to provide a safe environment for staff, patients, and visitors, this option should only be considered in circumstances where significant verbal or behavioral aggression has been displayed. Where an exemption is given, every effort must be made to minimise exposure of staff and other Service Users to smoke.

An incident form detailing the special circumstances applicable to the patient and the measures taken towards intervention must be completed and forwarded to the Smokefree Manager. The information gathered from the incident reports and/or security will be used to monitor the extent and type of special circumstances, the staff and departmental areas involved, and the measures taken to resolve the issues beforehand.

Under no circumstances is it acceptable for any member of staff, irrespective of seniority, to sanction smoking on WDHB grounds without following this procedure. Disciplinary proceedings will apply where there is clear evidence that a staff member has failed to comply with the above requirements.

Issued by	Hospital Smokefree Coordinator	Issued Date	September 2019	Classification	012-001-14-007
Authorised by	Pharmacy and Therapeutics Committee	Review Period	6 months	Page	5 of 8

Nicotine Dependent Patient Guidelines

3. Referring to Cessation Support Services

There is strong evidence to suggest that face-to-face counselling increases abstinence rates compared with the rates for those who receive minimal support. Patients wishing to stop smoking have access to both hospital based and community based stop smoking services. All of the services have no cost associated with attendance

All referrals should be made using the ATM – Smokefree Support & Referral form or contact **Smokefree Services Extn 42462**. Email Smokefreeservices@Waitemataadhb.govt.nz

Smokefree services will on receipt of referral make contact and work with the patient to determine which service is best suited to their needs.

4. Alternatives to NRT

4.1 Bupropion (Zyban)

Bupropion is an atypical antidepressant medication that helps people to stop smoking by reducing the severity of withdrawal symptoms via a number of different mechanisms, including dopamine and noradrenaline pathways.

Prescribing information

Please refer to the 'data sheet' which can be found on the Medsafe website

<https://www.medsafe.govt.nz/profs/datasheet/z/zybantab.pdf> , for full prescribing information

4.2 Varenicline (Champix)

Varenicline is a nicotinic acetylcholine receptor (nAChR) partial agonist; it also has antagonist properties, competing with nicotine for the same receptor site. The main receptor it targets is the alpha-4 beta-2 subtype but it also acts as a full agonist at alpha-7 neuronal nicotine receptors.

Varenicline is a fully funded, subject to Special Authority criteria, for patients who have previously had two trials of NRT or one trial of bupropion or Nortriptyline.

Prescribing information

Please refer to the datasheet which can be found on the Medsafe website

www.medsafe.govt.nz/profs/datasheet/c/Champixtab.pdf , for full prescribing information

4.3 Nortriptyline

Nortriptyline is a tricyclic antidepressant that helps people to stop smoking by reducing the severity of withdrawal symptoms via its actions on noradrenaline pathways.

Prescribing information

Please refer to the datasheet which can be found on the Medsafe website

www.medsafe.govt.nz/profs/datasheet/n/Norpresstab.pdf

<https://www.medsafe.govt.nz/profs/datasheet/n/nortriptylinenrimtab.pdf>

4.4 E-cigarettes

E-cigarettes are not to be used on Waitematā DHB premises as the use of such products runs contrary to the strategies currently in place which promotes smokefree living.

Issued by	Hospital Smokefree Coordinator	Issued Date	September 2019	Classification	012-001-14-007
Authorised by	Pharmacy and Therapeutics Committee	Review Period	6 months	Page	6 of 8

This information is correct at date of issue. Always check on Waitemata DHB Controlled Documents site that this is the most recent version.

Nicotine Dependent Patient Guidelines

5. The effect of stopping smoking on the metabolism of other drugs

Both smoking and stopping smoking affect the metabolism of a number of medicines.

Tobacco smoke contains substances, such as polycyclic aromatic hydrocarbons, which increase the activity of a number of liver enzymes that are responsible for breaking down a range of medicines. Therefore, medicines metabolised by these enzymes are broken down faster, which can result in reduced blood concentrations. When a person stops smoking, the enzyme activity slows down which **may** result in increased blood levels of these medicines.

Although stopping smoking can affect a range of medicines, the list below summarises the medicines that require particular attention.

Theophylline	Warfarin	Clozapine
Olanzapine	Chlorpromazine	Insulin

For further information contact Inpatient Pharmacy

Policy	Smokefree Policy Self-Discharging Patients Prescribing Guidelines for Inpatients Charts
Legislation	Smokefree Environments Act 1990 Health and Safety at Work Act 2015



Please note that this document is currently under review

Issued by	Hospital Smokefree Coordinator	Issued Date	September 2019	Classification	012-001-14-007
Authorised by	Pharmacy and Therapeutics Committee	Review Period	6 months	Page	7 of 8

This information is correct at date of issue. Always check on Waitemata DHB Controlled Documents site that this is the most recent version.

Nicotine Dependent Patient Guidelines

Appendix 2 – Prescribing Information for NRT

Step 1

Assessing Dependence

"How soon after waking do you smoke your first cigarette?"

Step 2

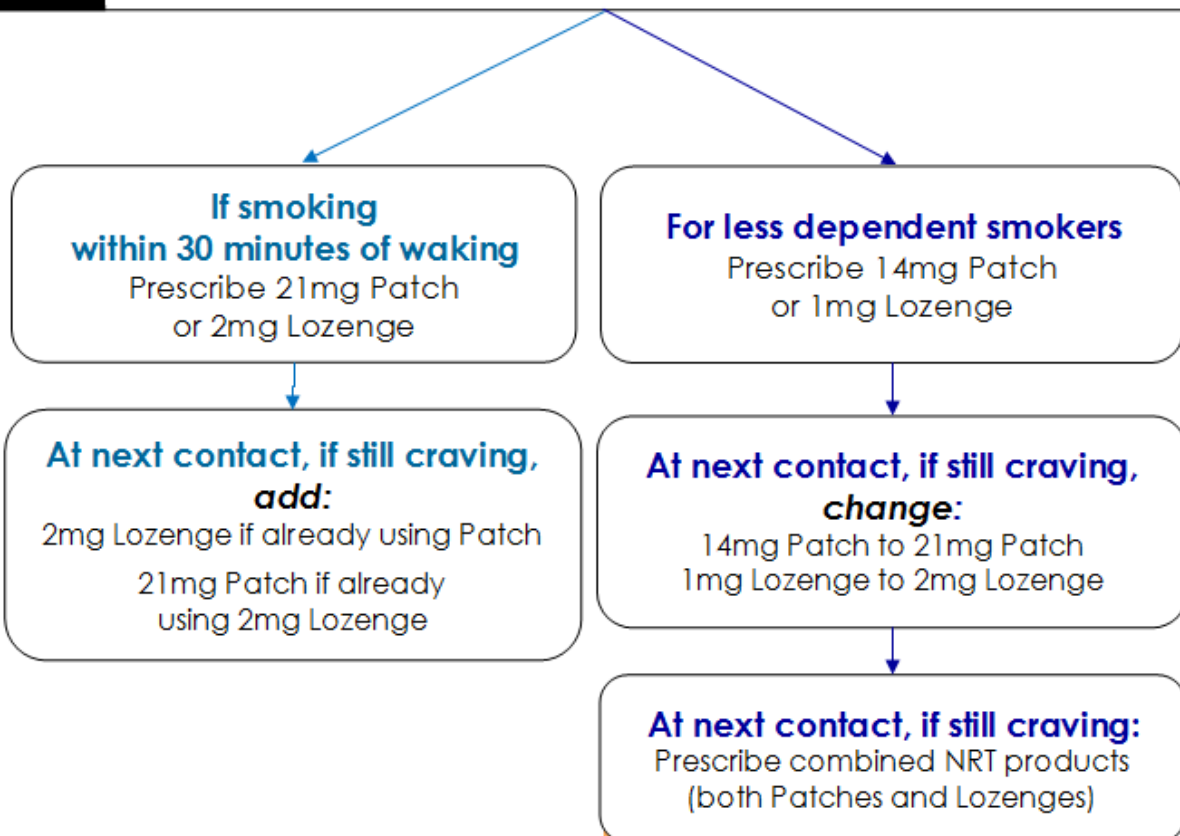
Health Considerations

If patient has had a stroke, heart attack or severe angina within the last two weeks, consult cardiologist before prescribing NRT.

NRT can be considered safe to use in pregnancy following an assessment of the risks and benefits. In general, NRT products, such as gum, lozenges, sublingual tablets and inhalators, should be used in preference to patches as they deliver a lower total daily nicotine dose than patches. If a patch is used it should be removed at night

Step 3

No Health Considerations



Issued by	Hospital Smokefree Coordinator	Issued Date	September 2019	Classification	012-001-14-007
Authorised by	Pharmacy and Therapeutics Committee	Review Period	6 months	Page	8 of 8

[PLACE PATIENT LABEL HERE]	
First Name: _____	Gender: _____
Surname: _____	
Address: _____	
Date of Birth: _____	NHI#: _____
Ward/Clinic: _____	Consultant: _____

Smokefree Support & Referral

Sect on 1 should be completed for all patients; **Section 2** for all smokers;
Complete **Section 3** to refer smokers through to Stop Smoking Services (Fax to 43532)

1. SMOKING STATUS – MANDATORY - To Be Completed For All Patients/Clients at Point of Entry

Initial Contact

ASK every patient and tick correct smoking status:

<input type="checkbox"/> Never Smoked <i>Never smoked Tobacco</i> Name: Designation: *Signature: Date: / /	<input type="checkbox"/> Current Smoker <i>Smoked Tobacco in the last 4 weeks</i> Complete Section 2	<input type="checkbox"/> Ex-Smoker <i>Has smoked Tobacco but quit more than 4 weeks ago</i> Name: Designation: *Signature: Date: / /
--	--	--

2. BRIEF ADVICE & NICOTINE WITHDRAWAL MANAGEMENT – MANDATORY

ED

Please complete this section for all smokers presenting to ED

<input type="checkbox"/> Offered NRT – accepted and dispensed <input type="checkbox"/> Offered NRT – declined <input type="checkbox"/> Advised to stop smoking & provided Quit smoking leaflet <input type="checkbox"/> Quitcard/Script for NRT provided on Discharge – Refer Patient for follow up & support – Fax to 43532 <input type="checkbox"/> Patient too unwell to offer advice or NRT - please follow up prior to discharge from ED or on the ward	
Notes/Comments	
Provided by	Name: _____ Designation: _____
* Signature:	Date: _____

Ward or Day Stay Facility

Please complete this section for all smokers admitted onto a ward

<input type="checkbox"/> NRT commenced or continued <input type="checkbox"/> NRT offered – declined <input type="checkbox"/> Advised to stop smoking & provided Quit smoking leaflet (if not already provided by ED) <input type="checkbox"/> Quitcard/Script for NRT provided on Discharge – Refer Patient for follow up & support – Fax to 43532	
Notes/Comments	
Provided by	Name: _____ Designation: _____
* Signature:	Date: _____

3. SUPPORT TO QUIT SMOKING - Fax this Form to 43532 (DHB Central Referral and Triage Service)

Providing support, motivation and behavioural change therapy will help your patient to stay quit.

Fax this Form to 43532 to access all Specialist Stop Smoking Services.

- CONSENT** - Permission has been given for the personal information detailed on this form (including the NHI number) to be faxed to WDH B's Central Smokefree Triage and Referral Service

*Waitemata DHB Policy states that you must date, sign and print your name & designation after each entry

A message for partners/family/ whānau

You can help your partner or family member by supporting and encouraging her. Stop smoking together and make sure your home and car are smokefree.

“The more support my mum has, the easier it becomes for her to quit. The first six weeks after I am born can be a rough time for my mum, and she’ll need your help to stay Smokefree. Please don’t smoke around my mum and me. Kia Ora!”



Smokefree Beginnings

Help to quit smoking



Congratulations on your first step!

If your baby could talk, he or she would thank you for choosing to quit, and making their life healthier and happier.

Tobacco smoke contains nicotine and around 4,000 other dangerous chemicals, including things like cyanide, carbon monoxide, ammonia, rat poison and lead.

When you smoke you deprive your baby of oxygen. This increases the chance of miscarriage, premature birth, low birth weight and sudden unexplained death in infancy (SUDI), sometimes called cot death. But if you quit smoking, your health and your baby's health will become stronger.

Help is at hand

You have already taken the first step and that is amazing and there are many things you can do to make this easier.

Get professional help

We know that it can be difficult to stop smoking. But we also know that you want to give your baby the best possible start in life.

Your local Stop Smoking Services give support and encouragement to help you stop smoking for good. Your LMC can refer you or you can refer yourself.

Call or TXT: 021 243 2146

Email: smokefreeservice@waitematadhb.govt.nz

Talk to your LMC

Talk to your LMC at each pregnancy visit; set yourself small goals each visit and report back on what has happened. Don't worry if you don't get it right straight away, many people don't, but just keep trying.

Try nicotine replacement (NRT)

If you find it hard to stop there are patches, gum or lozenges that can help with the craving for a cigarette. Although these contain nicotine they do not have all the other harmful chemicals, so are much safer than smoking. Your LMC can give you a prescription for subsidised NRT.

Talk to family and friends

Tell your family and ask them to support you to make a healthy start for your baby.

Set a goal to make your home and your car smokefree places.

Think about the money you are saving

Add up what you would normally spend on cigarettes and put it aside to spend on treats for you and your baby. You deserve it.



Other resources

If you need some extra support to quit, there are other options available that can really make a difference.

Aukati KaiPaipa –

Free stop smoking advice for Maori and their whanau.

Ngati Whatua o Orakei Health Services
(09) 578 0967

Te Ha Oranga

(09) 420 8523 Helensville
(09) 423 6091 Wellsford

Quitline

Telephone advice, text service, and Quitter Blog support group:
0800 778 778

Pacific Quit Smoking Service:

Supporting Pacific people to quit.
Contact the Pacific team:
0800 867 848

Asian Smokefree Communities Programme;

Chinese (Cantonese & Mandarin):
448 0475 Or 027 357 1800

Korean:

448 0474 or 027 359 6880

Indian (Hindi & Fijian Hindi):

448 0018 or 021 0260 4196

Burmese:

448 0017 or 021 0260 4197

Pregnancy Stop Smoking Advice Service

Supporting pregnant women & their whanau:
General enquiries – 448 0013

Physical benefits of quitting

Time after last cigarette	Physical changes
20 minutes	Blood pressure and pulse rates return to normal.
8 hours	Levels of carbon monoxide and oxygen return to normal.
24 hours	Chance of heart attack begins to decrease.
48 hours	Nerve endings start to regrow; taste and smell increases.
72 hours	Airway tubes relax – lung capacity increases.
3 weeks – 3 months	Improved circulation. Lung function increases up to 30%
1-9 months	Decreased coughing, sinus infection, fatigue & shortness of breath. Regrowth of airway cilia increases ability to clear mucus and clean the lungs reducing risk of infection. Overall energy level increases.
Long term effects of quitting	After 1 year, risk of death from heart attack and stroke is reduced by up to half.



Support to Quit Smoking

Let's talk about what's best for you

(Pictured above) Porotiti: Maori wind instrument used in ancient healing practices for respiratory ailments, that can also be used as an aid when quitting smoking.

Available from Te Hotu Manawa Maori:
Auckland (09) 638 5800: www.tehotumanawa.org.nz

Welcome to our Smokefree environment

Waitemata District Health Board is committed to improving the health of those who use mental health and addiction services. This includes physical health; if you are a smoker, quitting smoking is the best thing you can do to improve your physical health.

We want the best health for everyone and we ask that you observe our Smokefree (auaki kore) policy that prohibits smoking in all our facilities.

Smoking often worsens heart conditions, diabetes, respiratory conditions, and many types of cancer. It can affect the amount of some medications used in treating mental illness, especially clozapine (smokers need more).

We understand that not everyone wants to quit smoking, even during a stay in hospital.

Staff are trained to support you to:

- manage nicotine withdrawal symptoms
- manage in a Smokefree environment
- quit for your hospital stay
- quit for good

What are cravings (withdrawal)

Nicotine in tobacco smoke is absorbed in the lungs and reaches the brain in 7 – 10 seconds. This results in a release of a chemical called dopamine which is believed to be linked to reward.

If you smoke tobacco regularly, your body gets used to a steady amount of nicotine – the addictive component of tobacco products. Nicotine addiction is a chronic, relapsing, medical condition.

When you stop smoking suddenly, your body has to adjust. You might feel sick, have headaches, become angry or easily upset. You might feel nervous, restless and/or unhappy, and it may affect your regular sleeping pattern.

It may take a few days or weeks until you feel better depending on how much you smoke.

If you don't want to wait during this time, you can use Nicotine Replacement Therapy (NRT) to ease many of these feelings.

An eight week supply of patches and gum or lozenges will cost only \$3:00 per item.

What is Nicotine Replacement Therapy? (NRT)

Nicotine Replacement Therapy (patches, gum and lozenges, and microtabs) is a “clean delivery system” that gives you just enough nicotine to help cope with the effects of withdrawal.

NRT is safe to use by most people and does not cause cancers, heart disease or respiratory disease. The harmful effects of smoking come from other poisons that burning tobacco releases.

Talk to staff to find out how NRT can help you. Many of them are Quit Card Providers. Each person has different needs so discuss the best combination for you. NRT is free to those who are in hospital or other treatment units. In the community, NRT is available via prescription or Quit Card.

Talk to your GP or local health professionals about other products that are available to assist you to become Smokefree.

Our core values

Customer Focus

Integrity

Compassion

Respect

Openness



Waitemata
District Health Board
Te Wai Awhina