The Roadmap to Successful Change

BreatheEasyNC
Becoming Tobacco Free

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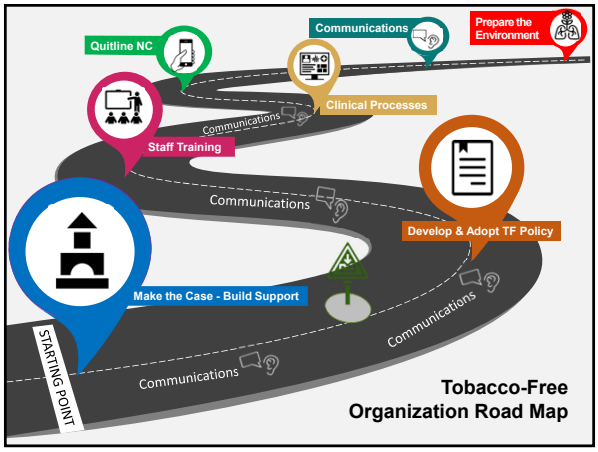


Why Tobacco and Behavioral Health?

Individuals with behavioral health issues
2-3X higher rate

Individuals with behavioral health issues make up approximately
25% of population

Yet Consume
44.3% of all cigarettes

Why Tobacco and Behavioral Health?

Whole Person Wellness

Cancer, Heart Disease and Lung Disease

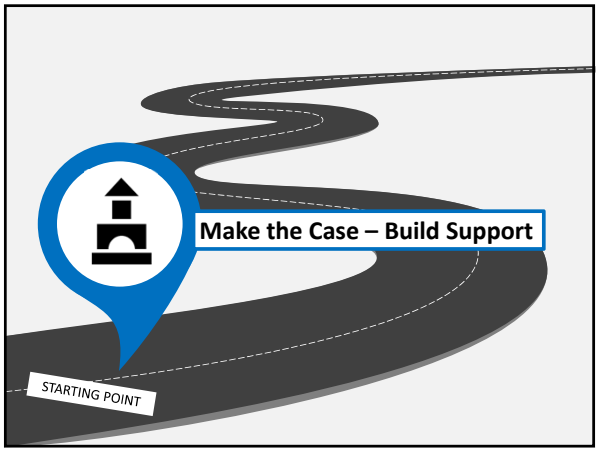
Are among the most common causes of death for individuals with behavioral health issues

Why Tobacco and Behavioral Health?

Concurrent Treatment of alcohol, tobacco and other drugs

Can increase long-term recovery by

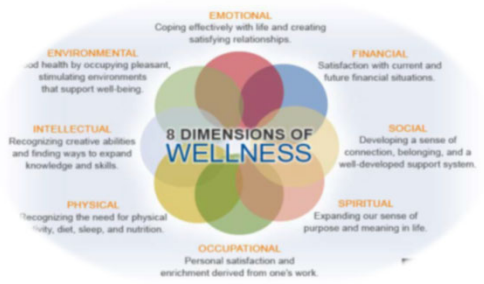
25%



Promote the WHY

- Foster discussions on how becoming 100% tobacco-free and offering tobacco use treatment fit with your organization's mission, vision, or values.
- Link the policy to evidence-based treatment for mental health and substance use disorders, promoting wellness, and whole person care.
- Tobacco-free policies are key to health equity, protecting everyone's right to clean air

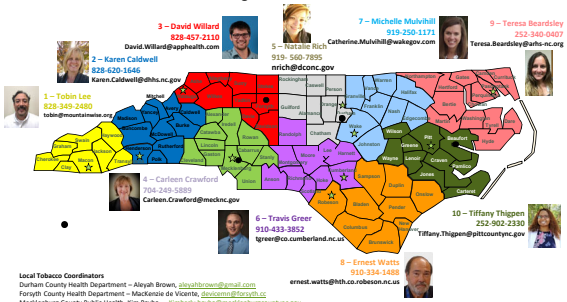
Tobacco-Free Supports Whole Person Wellness



Tobacco-free policies are key to health equity, protecting everyone's right to clean air

You don't have to do this alone…

North Carolina Regional & Local Tobacco Control Staff



Local Tobacco Coordinators
Durham County Health Department – Aleyah Brown, aleyahbrown@gmail.com
Forsyth County Health Department – MacKenzie de Vicente, devicemn@forsyth.cc
Mecklenburg County Public Health- Kim Bayha, Kimberly.bayha@mecklenburgcountync.gov
Orange County Health Department- Rita Krosner rkrosner@orangecountync.gov

Statewide Tobacco Use Treatment Integration:
Stephanie Gans, stephanie.gans@dhhs.nc.gov

Statewide American Indian Tobacco Coordinator
Lu McCraw, Luanna.McCraw@dhhs.nc.gov

It starts with staff – ALL staff

- Build awareness among all stakeholders about the WHY – leadership, board members, referral sources, staff, clients etc.
- Assess staff needs around policy readiness
- Assess needs around helping staff who use tobacco to cut back/quit
- Conduct listening sessions, surveys, or interviews with staff and clients separately.
- Identify your internal and external champions!

Assess Your Workforce

- Gain knowledge of employee feelings about tobacco use and support of workplace policy
- Assess employee use of tobacco products
- Learn what type of quit support to provide to your employees ready to ditch tobacco.

Employer Health Plan

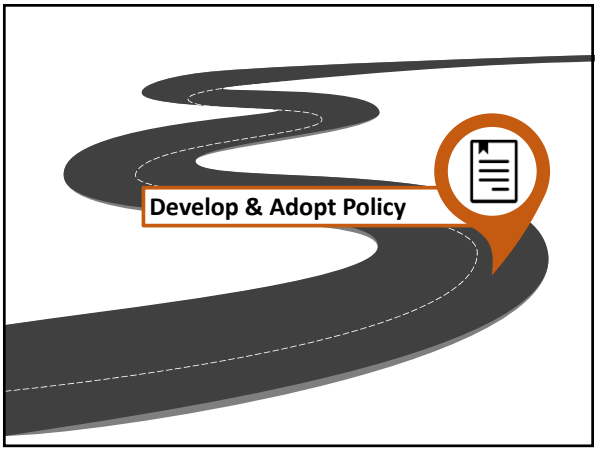
BlueCross BlueShield of North Carolina

UnitedHealthcare®

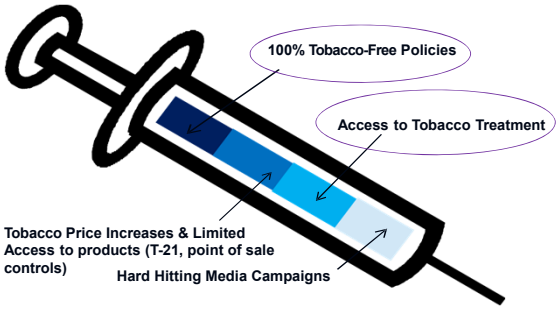
Begin by Helping Agency Staff to Reduce or Quit Tobacco Use

Convene a wellness committee

- Administrators and staff at all levels of your organization & clients should be a part of the process.
- For a comprehensive guide creating a wellness committee and implementing a policy, check out the Dimensions Tobacco-Free Policy Toolkit.



Tobacco ControlVaccine



CDC: evidenced-based

Comprehensive approach works best!

Benefits of 100% Tobacco-Free Campus Policy

Evidence shows that tobacco-free policies can:

- Support staff and clients who want to quit tobacco use – consider it an important part of providing tobacco use treatment
- Promote a healthy environment for all, including a cleaner environment and elimination of exposure to secondhand smoke and e-cig aerosol
- Increase job satisfaction for staff
- Support mental health and substance use disorder recovery

What does 100% Tobacco-Free Mean?

- A tobacco-free policy applies to all of the property under the program's control (that you rent or own)
- All of that property (buildings, grounds, and vehicles) is tobacco-free
- Tobacco includes the use of combustible, electronic, heated, and smokeless tobacco products
- No designated areas for tobacco use indoors or outdoors
- Programs do not purchase, accept as donations, or distribute any tobacco products

Why Tobacco-Free versus Smoke-Free?

"Smoking" means the use or possession of a **lighted** cigarette, lighted cigar, lighted pipe, or any other lighted tobacco product.

"Tobacco" means ***any product that is made from or derived from tobacco, or that contains nicotine, that is intended for human consumption or is likely to be consumed***, whether smoked, heated, chewed, absorbed, dissolved, inhaled or ingested by any other means, including, but not limited to, a cigarette, a cigar, pipe tobacco, chewing tobacco, snuff, or snus.

"Tobacco" also means **electronic smoking devices** and **any component or accessory** used in the consumption of a tobacco product, such as filters, rolling papers, pipes, and substances used in electronic smoking devices, whether or not they contain nicotine.

"Tobacco product"

does not include drugs, devices, or combination products authorized for sale as a tobacco cessation product, as a tobacco dependence product, or for other medical purposes, by the U.S. Food and Drug Administration (FDA)

Electronic-cigarettes or vaping devices are not approved by the FDA as evidence-based cessation method.

Promote Adherence to the Policy

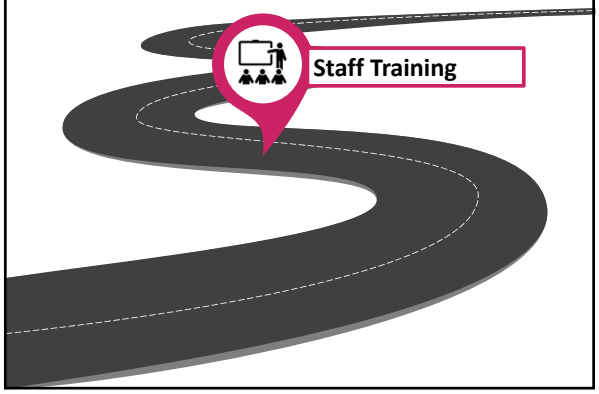
Promoting adherence to the policy should be consistent over time & equally applied to staff, clients, & visitors.

Learn how to promote adherence from our FAQs

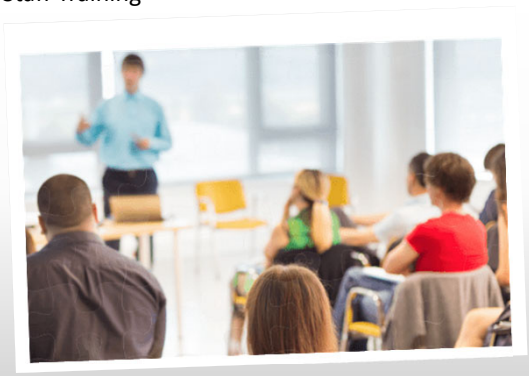
Make evaluation of tobacco use treatment & policy activities a permanent part of organization activities.

Evaluate…

learn how to create an evaluation plan



Staff Training



QUITLINENC

BreatheEasyNC
Becoming Tobacco Free

FOR ORGANIZATIONS FOR INDIVIDUALS

Training Staff

It is vital to train staff in evidence-based tobacco use treatment and how to promote a tobacco-free policy, prior to implementation of both. Your **regional and local tobacco control staff** and **You Quit, Two Quit** offer training and can help you plan one at no cost to your agency.

You can also attend one of these upcoming trainings!:

Date	Training & Link	Organization	Type
10/13/2021	**Helping Clients and Your Organizations Become Tobacco-Free**	NC Tobacco Prevention & Control Branch	Treatment Integration & tobacco-free policy implementation
10/19/2021	**Enhancing Recovery by Addressing Smoking During Addiction Treatment**	American Society of Addiction Medicine	Treatment integration & tobacco-free policy implementation
10/25-26/21 & 11/1-2/21	**Duke UNC Tobacco Treatment Specialist Training- Comprehensive**	Duke-UNC Tobacco Treatment Specialist Training Program	Treatment integration
11/17/2021	**Breathe Easy NC: Becoming Tobacco Free 1-Day Intensive**	Duke-UNC Tobacco Treatment Specialist Training Program	Treatment integration & tobacco-free policy implementation
12/02/2021	**Intensive Behavioral Health Approaches to Tobacco Use Treatment**	Duke-UNC Tobacco Treatment Specialist Training Program	Treatment integration

There are many additional training resources available to you in North Carolina:

Duke-UNC Tobacco Treatment Specialist Training Program (a comprehensive nationally accredited program that can help you become a Nationally Certified Tobacco Treatment Provider)

North Carolina Area Health Education Centers (AHECs)

Check out even more training resources at **QuitlineNC.com**

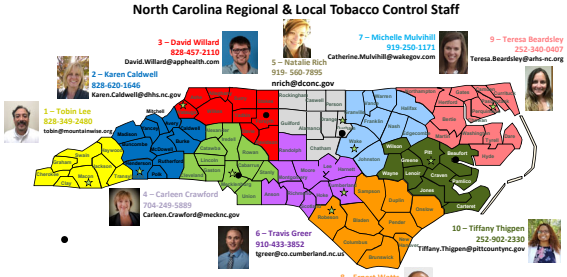
Million Hearts Tobacco Cessation Change Package also has a list of training resources.

National and State Resources – provide CEUs

- The National Behavioral Health Network's BHthechange.org
- The Smoking Cessation Leadership Center's behavioral health resource page
- Rx for change – good for pharmacists, mental health peer counselors, psychiatrists (and more)

Regional and local tobacco control staff are available to assist with trainings

North Carolina Regional & Local Tobacco Control Staff



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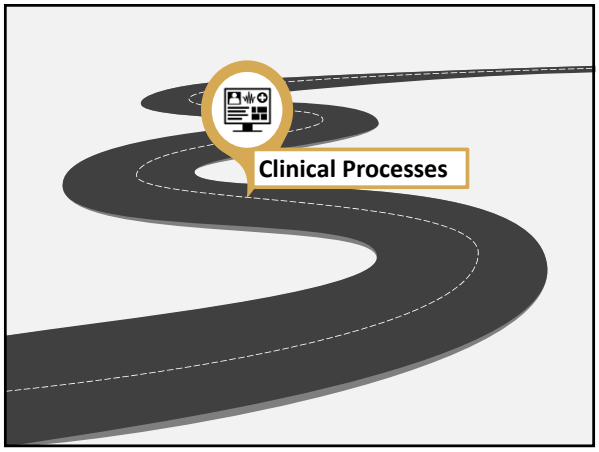


Clinical Processes

- Integrate tobacco use treatment into clinical processes
- **Use the Standard of Care for Tobacco Treatment**
- Offer tobacco treatment medications and counseling

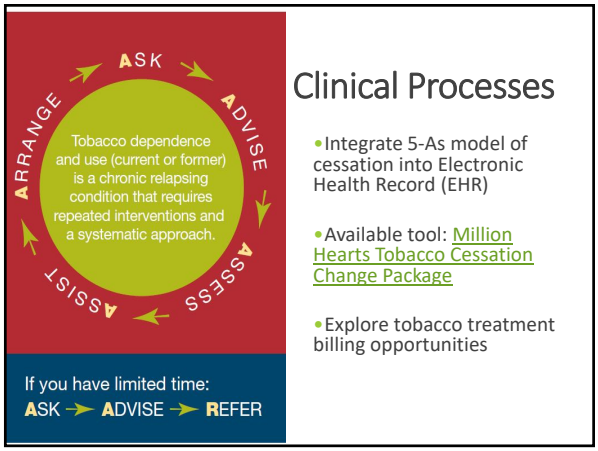
NORTH CAROLINA TOBACCO TREATMENT STANDARD OF CARE

FDA Approved Pharmacotherapy[1]
12 weeks of varenicline (Chantix®)
or
12 weeks of combination therapy
(nicotine patches and nicotine gum or nicotine lozenges)
Other pharmacotherapy includes bupropion, nicotine nasal spray and nicotine inhaler

+

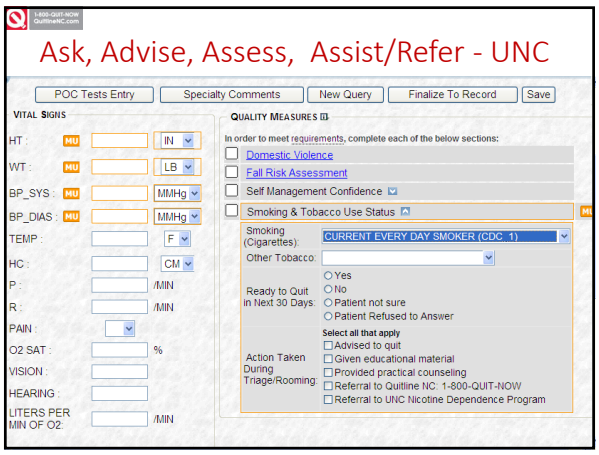
Evidenced-Based Counseling
In order of effectiveness:
- Face to face individual counseling
- Group counseling
- QuitlineNC – telephonic, texting, and web-based counseling

100% TOBACCO FREE ENVIRONMENTS HELP PEOPLE QUIT.



Clinical Processes

- Integrate 5-As model of cessation into Electronic Health Record (EHR)
- Available tool: Million Hearts Tobacco Cessation Change Package
- Explore tobacco treatment billing opportunities



Clinical Processes

See link for complete tool

Change Concepts and Change Ideas

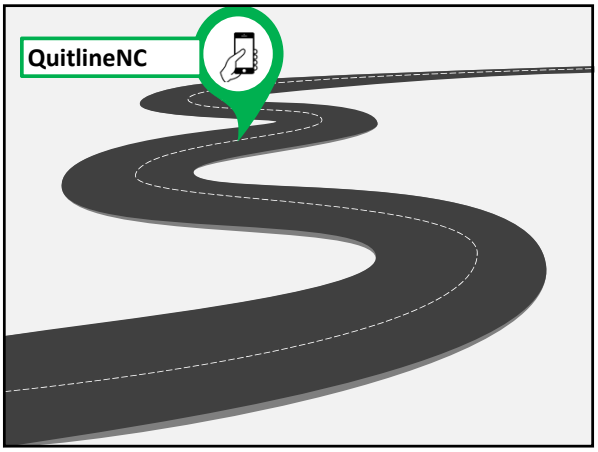
Key Foundations *Approaches and tools to assess the current status of tobacco dependence treatment in your practice or system and to make tobacco dependence treatment a priority.*
Make Tobacco Cessation a Practice and System Priority
Identify one or two key champions and assemble a multidisciplinary team
As a multidisciplinary group, conduct an assessment of your clinic/system and develop an action plan to address the current gaps
Adopt or update a unit, practice, or system-wide policy to reflect prioritization of tobacco treatment
Create a Supportive Environment for Cessation
Implement and strengthen hospital or clinic-wide tobacco-free or smoke-free campus policies
Leverage mass-reach media campaigns to encourage and normalize quitting (e.g., with media in waiting rooms, throughout clinic or hospital system)
Support employees and their family members in quitting smoking by providing health benefits for tobacco cessation
Equipping Care Teams *Approaches and tools to prepare and motivate healthcare staff to consistently address tobacco use.*
Equip All Staff to Engage in Tobacco Cessation Efforts
Adopt a clinician/staff training policy to train and retrain staff
Conduct onboarding and annual trainings on tobacco policies, systems, and procedures
Optimize billing practices by leveraging existing codes to capture all billable services
Provide Clinician and System-Level Feedback on Progress and Impact
Set and communicate specific, measureable performance and quality goals
Make tobacco cessation a quality improvement measure at the clinician or system level
Track clinician, clinic, hospital, and system performance to provide feedback to clinicians and decision-makers

Clinical Processes

Access to **7-FDA approved** quit medications

- QuitlineNC - free to eligible callers
- Standing orders – build into budget
- Clinical - community connections (FQHC/ PCPs)
- Grants / state resources
- Food Bank example

Arrange to have Nicotine Replacement Therapy (NRT) onsite!



QuitlineNC

QuitlineNC

1-800-Quit-Now
(1-800-784-8669)

ES 1-855-Déjelo-Ya
(1-855-335-3569)

www.QuitlineNC.com

@QuitlineNC

Text READY to 200-400

QuitlineNC

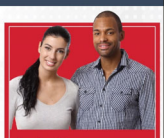
QuitlineNC Behavioral Health Program

1-800-Quit-Now (1-800-784-8669) • QuitlineNC.com

To better support tobacco users with mental health conditions including substance use disorder, QuitlineNC now offers an intensive Tobacco Cessation Behavioral Health Program. The program design includes higher intensity behavioral and pharmacological support consisting of:

- **Seven scheduled calls** to provide additional support during the pre-quit planning phase and to prevent relapse.
- **12-week regimen** of combination nicotine replacement therapy – nicotine patches for the addiction, plus nicotine gum or nicotine lozenge for urges.
- **A letter to the participant's health care provider** informing them that their patient is attempting to quit tobacco and giving them some suggestions on how they can support their patient in the process.
- **A team of dedicated coaches** who have received extensive training on mental illness and tobacco treatment. The coaches are also able to flex intervention content and tailor the treatment to these participants.

Eligibility:
The following mental health question below will be asked of all callers during registration. Those callers who report schizophrenia or bi-polar conditions (Tier 1) are automatically offered enrollment. Those who report depression, anxiety, Post-Traumatic Stress Disorder, Attention Deficit Hyperactivity Disorder or Substance Use Disorder (Tier 2) are asked a question to assess whether they believe their condition will interfere with their ability to quit and stay quit. Those who say "yes" are offered enrollment.

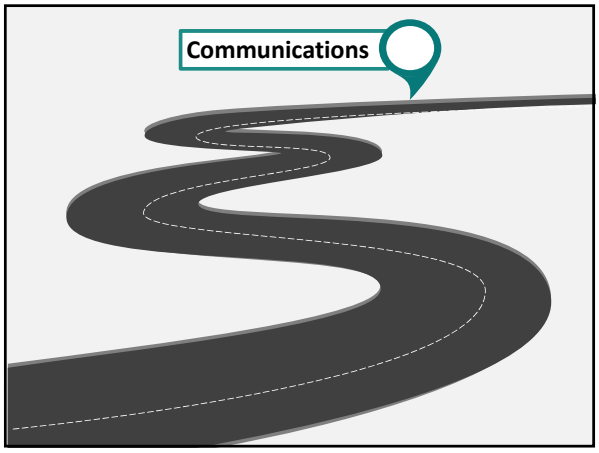


Question #1:
"Do you currently have any mental health conditions, such as:

- Bi-Polar Disorder
- Depression
- Drug or Alcohol Use Disorder (SUD)
- Generalized Anxiety Disorder
- Post-Traumatic Stress Disorder (PTSD)
- Schizophrenia
- Attention Deficit Hyperactivity Disorder (ADHD)

Question #2:
If the participants answered YES to Q1, then Q2 would be asked:

"Do you think that these mental health conditions or emotional challenges might interfere with your ability to quit?"



Communication

- Communicate early and often about this policy change and at every step of the journey.
- Use **positive** and **motivational** messaging (shared messaging available)
- Promote and discuss the WHY throughout the journey

Change for Life: Tobacco-Free Recovery
webpages: TobaccoFree@MeckNC.Gov

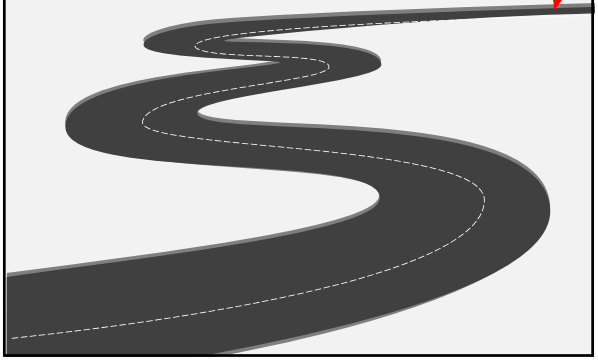
Tips for Communicating Your Policy

- **Be proud** to have clean air and confident in offering evidence-based treatment. Set this as the standard for how staff should communicate about the policy
- **Communicate in advance** with clients transparently and frequently about this change (**think months,** not weeks or days).
- **Offer accurate information** about the effects of tobacco use on mental and physical health, and **benefits of becoming tobacco-free** in programming.

Tips for Communicating Your Policy

- **Have signage**, posters, cards, whatever you need to communicate the policy to all onsite plus resources to help folks who want to quit.
- **Update your website** and any materials to consistently reflect the policy change (for example: if you have guidance on what to bring/not to bring to the program)
- **Understand the difference** between commercial tobacco products and traditional tobacco used by many American Indians and Alaska Natives - show respect for those traditions.
  - Click here for more information.

Prepare the Environment



Preparing the environment

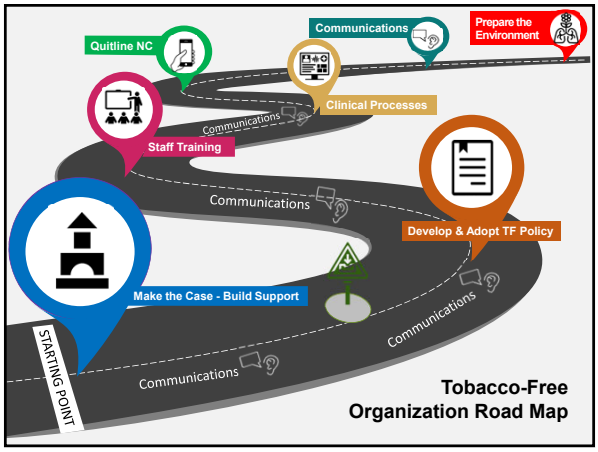
- Install signage and decals
- Remove ashtrays and thoroughly clean.

Preparing the environment

- Provide policy cards - install tabletop or full-size pull-up banners

Preparing the environment

- Transform smoking areas to wellness spaces
- Build in activities for healthy socialization – get creative and ask input from staff and clients!



Make the Case – Build Support	Develop & Adopt Tobacco-Free Policy	Staff Training	Clinical Processes
• Leadership buy-in • Leadership embrace and engagement • Organizational assessment • Survey staff • Staff motivation & buy-in • Identify champions • Form "wellness committee"	• Best practice samples • Define "tobacco" • Align with Human Resources • Health plan quit service coverage • Plan for evaluating outcomes	• Educate all staff • Staff quit support • Clinical staff: best practice tobacco treatment • Provide tobacco treatment resources	• 5-As integration • Quitline referrals • Health Record (EHR) • Medication access • Cessation billing

"Begin with the end in mind" ~Stephen Covey

QuitlineNC	Messaging/Communications Important part of every step along the journey	Prepare the Environment
• Register as referral site • Behavioral health protocol – free NRT • Proactive referrals via fax, secure email or web	• Staff targeted • Equity framing • Client facing - motivational • Tobacco education • Policy cards • Prominent campus signage • Posters, banners • Motivational cards • Website • Digital messaging	• Install signage • Repurpose smoking areas to wellness theme • Remove ashtrays and thoroughly clean

Whole Person Care. Tobacco-Free Supports Recovery. Quitting is a Journey.

Thank You !

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