


POLICY AND PROCEDURE

<u>POLICY TITLE:</u> Tobacco Dependence and Treatment	<u>POLICY #:</u> DSAMH009
<u>PREPARED BY:</u> DSAMH Policy Committee	<u>DATE ISSUED:</u> 07/19/2019
<u>RELATED POLICIES:</u>	<u>REFERENCE:</u> PM35
<u>DATES REVIEWED:</u> 08/01/2022 08/30/2023 08/14/2024 06/23/2025	<u>DATES REVISED:</u> 07/20/2022 07/19/2023 07/17/2024 06/18/2025
<u>APPROVED BY:</u>  <u>DATE APPROVED:</u> 7/9/2025 6:59 AM PDT	<u>NOTES:</u> <input type="checkbox"/> DSAMH Internal Policy <input checked="" type="checkbox"/> DSAMH Operated Program <input checked="" type="checkbox"/> DSAMH State Providers <input type="checkbox"/> Delaware Psychiatric Center <input type="checkbox"/> Targeted Use Policy (Defined in scope)

I. PURPOSE:

Of the approximately 480,000 annual deaths attributable to tobacco products, about 200,000 are among adults who smoke and have a mental health condition according to the CDC. A study by the 2020 National Survey on Drug Use and Health reported that approximately 1 in 4 (or 25%) of adults in the U.S. have some form of mental illness or substance use disorder, and these adults consume almost 40% of all cigarettes smoked by adults in America. The purpose of this policy is to provide specific requirements for contracted DSAMH providers and to delineate obligations and expectations regarding treatment of clients' tobacco dependence.

II. POLICY STATEMENT:

It is the policy of the Division of Substance Abuse and Mental Health (DSAMH) to require that all contracted providers routinely screen all clients for tobacco use and provide them with clinical treatment, education, and additional resources to support tobacco cessation as appropriate.

III. DEFINITIONS:

"5 A's Tobacco Cessation Brief Intervention Model" means:

- A. Ask all patients about tobacco use.
- B. Advise all tobacco users to quit.
- C. Assess willingness to quit now.
- D. Assist the tobacco user with a quit plan.
- E. Arrange follow-up with the patient.

“Tobacco product” means any product containing tobacco or nicotine including cigarettes, e-cigarettes, vaping devices, cigars, pipes, smokeless tobacco, or other tobacco products.

IV. SCOPE:

All contracted DSAMH providers will use an evidenced-based intervention for treating tobacco dependence approved by DSAMH such as the 5 A’s Model. In following this, all providers will regularly screen all clients for tobacco use and offer tobacco education to all clients as well as cessation strategies and options to clients who screen positive for tobacco use.

V. PROCEDURES/RESPONSIBILITIES:

- A. Training: At a minimum, providers will ensure training for new staff and on-going annual training, as appropriate, to promote and maintain the following principles and practices:
 - 1. Knowledge of the prevalence of tobacco use among the population they serve;
 - 2. Knowledge of the serious and significant medical conditions smoking can cause or exacerbate;
 - 3. Recognition of addiction to tobacco as deserving equal clinical attention as other substances that cause addiction;
 - 4. Understanding that staff use of tobacco while in the presence of clients is strictly prohibited due to the potential harmful effects of secondary exposure and poor modeling behavior.
- B. Clinical Practices: At a minimum, all providers will:
 - 1. Screen all clients for tobacco use upon admission and annually thereafter, including type, frequency, and duration of tobacco use;
 - 2. Offer tobacco education to all clients, regardless of screening results;
 - 3. Offer brief interventions, referrals to treatment, and other supportive resources to those clients who screen positive;
 - 4. Provide regular follow-up and re-assessment, adjusting each client’s individualized plan of care as needed;
 - 5. Document all of the following elements in each client’s clinical record:
 - a. Assessment: At a minimum, all providers will document amount, type of tobacco product(s) used, frequency, duration of tobacco use, and readiness to change.
 - b. Intervention: At a minimum, all providers will document any level of tobacco cessation intervention within the client’s recovery plan. Interventions may include providing literature, assisting with calling or providing the number for the Delaware Quit Line (1-866-409-1858), follow-up with a prescriber for Nicotine Replacement Therapy (NRT), or other interventions as appropriate.
- C. Provider Agency’s Internal Policy Expectations:
 - 1. Agency shall have written policies clearly outlining expectations around tobacco use by all employees as well as clients.
 - 2. Agency tobacco use policy shall include agency response to tobacco use among staff.
 - 3. Agency policy shall clearly include the use of all tobacco products and paraphernalia, such as vape products and smokeless tobacco.
 - 4. Agency policy will clearly state that all agency facilities that are on State grounds are to

be completely tobacco-free, and that no tobacco products may be used in the presence of clients or in any agency-owned or used vehicles. Additionally, all agencies should comply with the [Delaware Clean Indoor Air Act](#), which prohibits smoking in all public areas, including inside substance use disorder treatment facilities.

5. Agency policy will clearly state that all agency facilities that are not located on State grounds are encouraged to be tobacco-free, and that no tobacco products may be used in the presence of clients or in any agency-owned or used vehicles. Additionally, all agencies should comply with the [Delaware Clean Indoor Air Act](#), which prohibits smoking in all public areas, including inside substance use disorder treatment facilities.
 - a. If the facility provides a designated smoking area for clients, "Warning: Smoking Permitted" signs shall be prominently posted and properly maintained where smoking is permitted pursuant to Title 16 §2904(2) and (4). Such signs shall be posted and maintained by the owner, operator, manager, or other person having control of such area. The letters on such signs shall be at least one (1) inch in height.
6. Agency tobacco policy shall be reviewed as part of orientation procedures for new employees and annually reviewed with all employees.
7. Agency tobacco policy shall be communicated to all clients receiving services or referral sources.

VI. POLICY LIFESPAN: This policy supersedes previous distributions of this policy as detailed in dates revised. This policy will be reviewed annually.

VII. RESOURCES:

1. 2009 Smoking Cessation Toolkit for Persons with Mental Health Issues, University of Colorado Department of Psychiatry. A complete and helpful guide to advance the culture and to help individuals quit. Includes many references and summaries of the literature.
2. Smoking Cessation Leadership Center: This national center has many excellent resources, toolkits, and references to help people living with mental illness to quit smoking.
3. Tobacco-free Living in Psychiatric Settings: A Best Practices Guide Promoting Wellness and Recovery, State Commissioners of Mental Health and State Medical Directors provide tips for advancing the culture of mental health toward smoke-free living.
4. American Cancer Society, (800) ACS-2345 or (800) 227-2345, <http://www.cancer.org>
5. American Heart Association, (800) AHA-USA1 or (800) 242-8721, <http://www.americanheart.org>
6. American Lung Association, (800) LUNG-USA or (800) 548-8252, <http://www.lungusa.org>
7. National Cancer Institute, (877) 448-7848 for smoking cessation help, (800)-4-CANCER or (800) 422-6237, <http://www.cancer.gov>
8. Centers for Disease Control and Prevention, (800) CDC-INFO (800) 232-4636
9. Smokefree.gov, (800) QUIT-NOW or (800) 784-8669, U.S. Surgeon General Office
10. CHOICES - A Model of peer support, A New Jersey-based program where individuals living with mental illness educate others about the benefits of smoking cessation and offer support and strategies to help with quitting. CHOICES is short for Consumers Helping Others Improve their Condition by Ending Smoking. This program won a 2009 Psychiatric Services Award.
11. Centers for Disease Control and Prevention (CDC) <https://millionhearts.hhs.gov/files/Tobacco-Cessation-Action-Guide.pdf>
12. Delaware Clean Indoor Air Act: <https://delcode.delaware.gov/title16/c029/index.html>
13. CDC Burden of Cigarette Use: <https://www.cdc.gov/tobacco/campaign/tips/resources/data/cigarette-smoking-in-united->

[states.html](#)

14. Disparities in Current Cigarette Smoking Among US Adults With Mental Health Conditions:
[https://www.cdc.gov/pcd/issues/2022/22_0184.htm#:~:text=Of%20the%20approximately%20480%2C000%20annual,the%20tobacco%20industry%20\(5\).](https://www.cdc.gov/pcd/issues/2022/22_0184.htm#:~:text=Of%20the%20approximately%20480%2C000%20annual,the%20tobacco%20industry%20(5).)