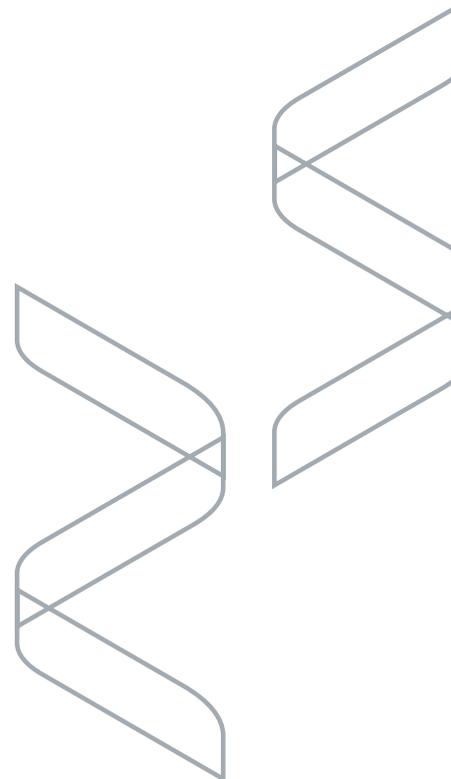




Government of **Western Australia**
North Metropolitan Health Service
Mental Health, Public Health and Dental Services

Smoke Free Mental Health Project

Summary Report
October 2020





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Smoke Free Mental Health Project

The Smoke Free Mental Health Project aimed to reduce smoking on Mental Health Service sites across the North Metropolitan Health Service (NMHS) to protect patients, staff and visitors from exposure to environmental tobacco smoke.

The Executive Director of Mental Health, Public Health and Dental Services (MHPHDS) made the commitment one-year prior that Mental Health Services in NMHS would become totally smoke-free from 27 August 2019.

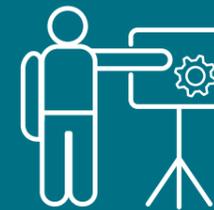
Project activities aligned with the eight evidence-based standards of the Global Network for Tobacco Free Healthcare Services and are summarised in this report.



Governance & commitment



Communication



Education & training



Identification, diagnosis & cessation support



Tobacco-free environment



Healthy workplace



Community engagement



Monitoring & evaluation



Governance and commitment

1

A Project Steering Group provided support and leadership for the Project

- Chaired by the Director Public Health, with members from MHPHDS Mental Health executive and senior management, MHPHDS Health Promotion and tobacco cessation experts from Cancer Council WA, and Australian Council on Smoking Health.
- Project management was led by MHPHDS Health Promotion.
- A Project Working Group and subcommittees were established to implement project activities.

More than

> **100** people

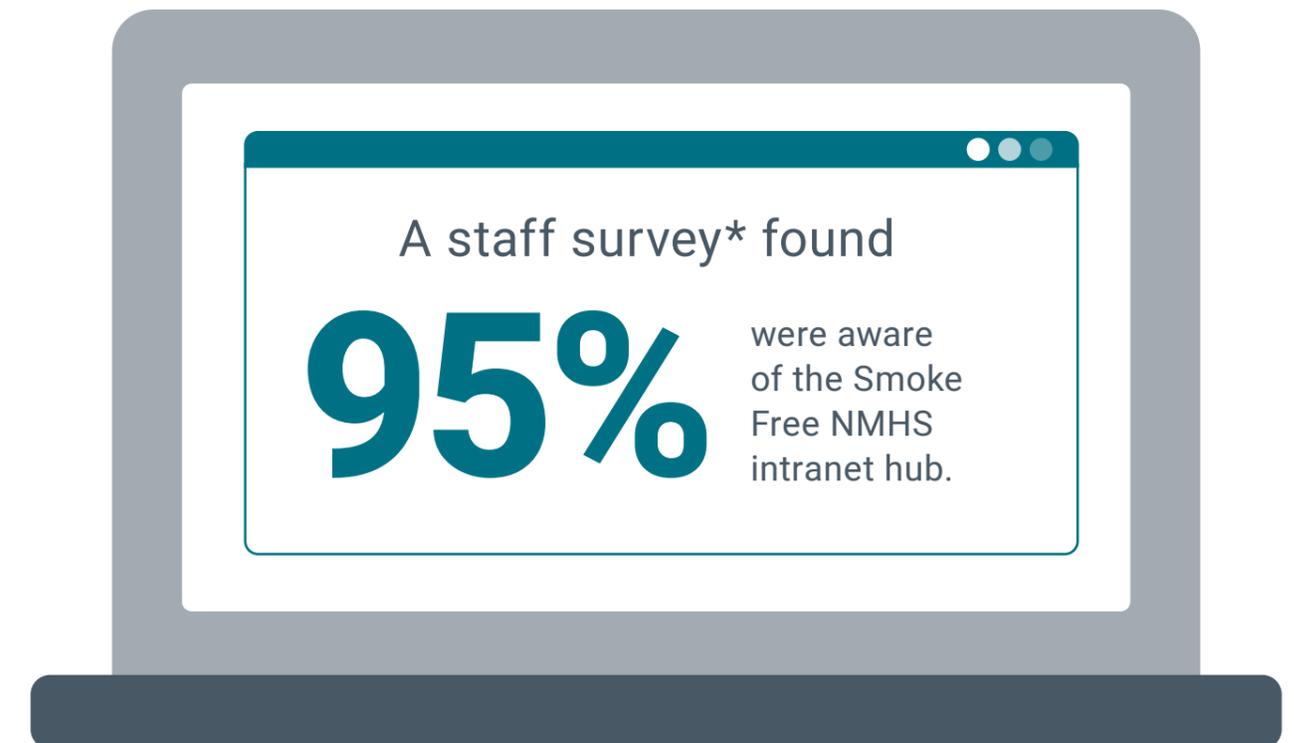
from across MHPHDS Mental Health, including consumer and carer representatives were involved in the various groups and subcommittees.

Communication

2

The project adopted a supportive and caring approach towards nicotine dependent patients and staff, as reflected in the project logo (below).

A comprehensive Smoke Free NMHS intranet hub was created to provide staff with a single source of information, including evidence, training, guidelines, policies, resource materials and support for staff who smoke.



Supporting people to be
Smoke Free

Education and training

3

- Nine guest speakers presented at staff seminars on best practice evidence on smoking and mental health.
- Smoking Cessation Support Training was developed to support staff to implement new clinical care guidelines.
- Training has been adapted into an e-Learning program and embedded into the staff induction program.

460
Clinical staff
trained



70%
Trained from
Graylands



Training was delivered face-to-face to more than 460 clinical staff (52%).

Almost 70% of staff with patient contact at Graylands Hospital completed the training.

Participants** found the training was effective:

76%

said it increased their intention to **encourage patients** cut down or quit smoking

73%

said it increased their knowledge to **manage nicotine** addiction among patients

56%

said it increased their **confidence** to manage smoking onsite

Identification, diagnosis and tobacco cessation support

4

- Smoking Care Guidelines were developed to provide guidance to clinical staff on effectively addressing patient nicotine dependence in a supportive and evidence-based manner.
- Both behavioural support interventions and pharmacological therapies, such as Nicotine Replacement Therapy (NRT), can be used.
- Higher dose NRT patches can be used in combination with a faster acting NRT.
- The Medication: Nurse Initiated Nicotine Replacement Therapy Policy was revised to allow nursing staff to initiate NRT in a timely manner.
- An NRT Assessment tool was developed for inclusion in patient records.

Pharmacy records*** show a **69% increase** in the number of patients accessing NRT and a 64% increase in NRT used. An audit of long-stay patient medical records found a five-fold increase in behavioural support interventions.^



Anecdotally, some patients have reconsidered their smoking and have reduced or quit smoking.



Tobacco-free environment

5

- Designated smoking areas and tobacco-related products, such as lighters and waste were removed and areas were cleaned.
- The sale of cigarettes at the volunteer-run Graylands Canteen ceased.
- New positive smoke-free signs were installed.
- A Smoking Care fact sheet was included in the Patient Admission Pack, and visiting service providers were informed the sites were becoming smoke-free.

Physical evidence^^ of onsite smoking decreased by **60%** at Graylands Hospital and by **67%** at Selby Lodge.

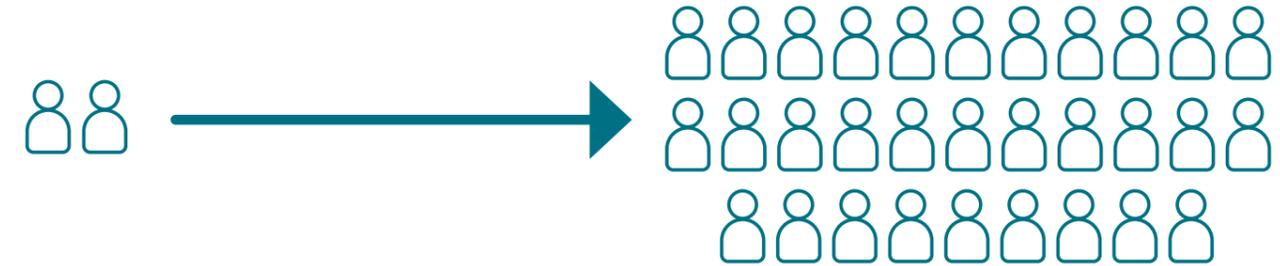


Healthy workplace

6

- Staff who smoke have always been offered free NRT, so this was widely promoted.
- The Smoke Free NMHS intranet hub provided information and advice for staff to quit smoking or manage nicotine withdrawals whilst at work.

Pharmacy records found the number of staff accessing NRT from work **increased** substantially (from 2 to 31 staff).



Once sites were totally smoke-free, the online staff survey found*:

60%

awareness that staff could access NRT through work (up from 47%).

64%

who smoked were interested in **receiving support** from their workplace to quit smoking and / or manage cravings at work (up from 23%)

50%

noticed **exposure** to other people's cigarette smoke at work had **reduced**.

9%

noticed **exposure** to other people's cigarette smoke at work had **increased**.

Engagement

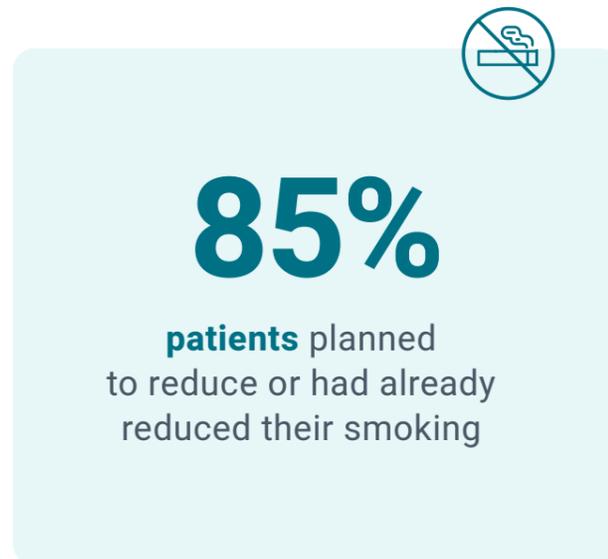
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A survey of patients was undertaken to find out how they felt about smoking and what support they may need to reduce their smoking. This helped inform project activities.

85% patients who smoked planned to reduce their smoking or had already started to reduce their smoking as a result of the site becoming smoke-free.

Selected staff were invited to join the Working Group and other subcommittees guiding the Project.

All staff working across MHPHDS Mental Health were invited to participate in online surveys. Pre-intervention (December 2018) 17% of staff responded to the survey and post-intervention (December 2018) 10% of staff responded.



The online staff survey* found:

Staff support for becoming completely smoke-free increased.



Staff who agreed that smoking can have a negative effect on workplace morale increased.



Staff awareness about specific elements of the Smoke Free Policy and guidelines (such as staff not being permitted to assist patients leave the premises to smoke) increased.



Monitoring and evaluation

8

A comprehensive evaluation plan was developed during the planning stages of the project.

Key evaluation tools included

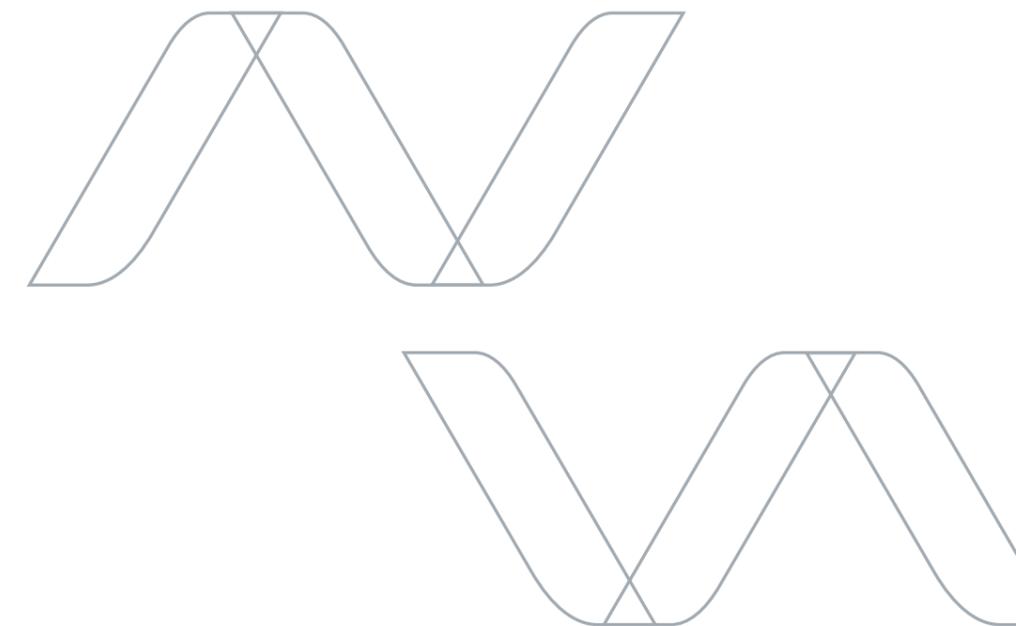
Observational audits (cigarette butt counts)

Online staff surveys

Hospital incident reporting

Patient medical and pharmacy records audits

Post-training surveys



Recommendations

Find ways to increase engagement with medical staff.

Continue to train existing staff on Smoking Cessation Support.

Continue with behavioural therapy and NRT.

Continue Smoke Free Mental Health Working Groups at each site.

Advocate for introduction of an evidenced-based, multi-strategic approach to support mental health inpatients who smoke across WA Health system.

Footnotes

*Online survey of Mental Health staff in NMHS (pre-intervention: n=295, Dec 2018; post intervention: n=179, Dec 2019)

**Post-training survey completed by 174 (38%) participants completing training face-to-face

*** Pharmacy records of NRT prescribing data (pre-intervention; n=89 Jul-Dec 2018; post-intervention: n=154, Jul-Dec 2019)

^Based on audit of three patient files pre-intervention (Mar-May 2019) and post-intervention (Jun-Aug 2019)

^^Cigarette butt counts (pre-intervention: Dec 2018; post-intervention: Sep 2019)

Further information

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