

'Smokefree' Mental Health'

Tobacco Control Collaborating Centre newsletter

Welcome

Welcome to the third issue of 'Smokefree' the Tobacco Control Collaborating Centre's smokefree mental health newsletter.

In this issue we have tried to cover some of the practicalities of becoming smokefree. We would like to thank the North East region for sending us their

report on good practice, and would also like to thank the West Midlands' region for providing information about an initiative to assist the NHS, voluntary services and private mental health services in its region with the run up to 1 July.

Bryan, Hilary, Paul and Barbara

Smokefree site visits

The Tobacco Control Collaborating Centre is currently conducting site visits across England to those units that have requested assistance.

Requests for site visits have been mostly triggered by the best practice workshops that have taken place in many of the regions. Delegates who attended realised they had specific issues which would be best resolved by on site support. Others have contacted the Centre following correspondence from us as they are concerned about their ability to comply. In certain regions the CSIP lead and the Regional Tobacco Policy Manager have worked with the TCCC to put on a series of visits over a number of days, visiting all units within the area, and meeting key personnel that are responsible for taking forward the smokefree agenda.

Whilst most mental health service providers are aware of the 1 July deadline, it has become apparent there is still much confusion around 'current' compliance. Many units still do not have the correct signage in place, residents are smoking in corridors and sitting rooms, and therapy sessions are being conducted in rooms where patients are smoking. Each unit thought they had until 1 July to put these preparations in place, or that the legislation didn't apply to them and they would continue to have an exemption.

We included an extract from the official regulations in the previous newsletter, but to reiterate:

care homes¹, hospices² and prisons may designate either individual bedrooms or rooms to be used only for smoking by persons over 18 years of age.

Residential mental health units³ may designate either individual bedrooms or rooms to be used only for smoking for use by persons over 18 years of age. This exemption applies only until 1 July 2008 when they are required to become smokefree.

¹Care homes as defined in the section 3 of the Care Standards Act 2000

²Hospices which as their whole or main purpose provide palliative care for persons resident there who are suffering from progressive disease in its final stages.

³Residential mental health units means any establishment (or part of an establishment) maintained wholly or mainly for the reception and treatment of persons suffering from any form of mental disorder, as defined in section 1(2) of the Mental health Act 1983.

You may download copies of the regulations, signage and other resources from the Smokefree England website: www.smokefreeengland.co.uk/resources/guidance-and-signage.html

For further information please contact the TCCC on 01926 490190 or email: tcc@tobaccocontrolcentre.org.uk

Practice Sharing

In March, the TCCC undertook a number of site visits in the North East region. These were organised by Fresh North East in conjunction with Northumberland, Tyne & Wear Trust and Tees, Esk & Wear Valleys NHS Trust

A report of the findings and recommendations was prepared and Fresh North East and Northumberland, Tyne & Wear NHS Trust have kindly allowed us to print an extract from this report:

Practice sharing:

The site visits highlighted areas of good practice which would be valuable to share as many units could benefit from this experience:

- Regular communication with staff and patients in community meetings on smokefree law, moving to external smoking areas and stop smoking support.
- Introduce set times for cigarette breaks on the unit. This helps build a routine so patients know exactly when they can access outside areas/temporary smoking rooms. Set breaks allow staff to manage smoking more efficiently; it protects staff time to carry out other duties uninterrupted and most importantly can help engage all patients in other unit activities (as opposed to some patients opting out to sit in the smoking room/area). Units which have introduced this approach reported improved patient sleep patterns during the night and more positive interaction with staff in unit activities.
- Ensure easy access to a variety of nicotine replacement therapy (NRT) products and other NICE approved cessation aids. Having staff trained in brief intervention and some in level II increases the support available to patients wishing to quit. An assessment of smoking prevalence across the unit and including smoking in care plans can help identify patients who may need additional support e.g. if a patient is a heavy smoker but will have limited access to outdoor smoking areas initially you may need to use NRT/other approved product to help manage their level of addiction.
- When smoking incidents occur inside premises e.g. bedrooms ensure that staff complete an incident form or record the information in an incident log book. This will be useful information should a compliance officer need to visit the premises in response to a reported complaint or routine visit; it also demonstrates the unit is taking reasonable steps to implement the smokefree law.
- It is acceptable to restrict patient access to cigarettes and/or lighters and this is working successfully in a variety of mental health settings. This is most effective when used as a blanket approach otherwise it has potential to create tension amongst patients. However, if an individual is repeatedly smoking in smokefree areas or is considered high risk then appropriate restrictions can be made on a case by case basis and monitored carefully by staff.
- Where possible involve patients in decision making such as setting times for smoking and ideas on how to utilise old smoking rooms. Explore funding opportunities to make positive use of the old smoking rooms e.g. mini-gym, resource and education room, communal activity area.
- If deep clean money is available to the unit use this to clean the smoking room after it has closed, this will help remove the engrained smell of tobacco and offer refreshed facilities to all patients.
- It is recommended that where units have an exemption and are struggling to implement the smokefree regulations they should 'buddy' up with a similar unit who have already gone smokefree successfully to help support this process in the run up to 1st July. The Trust should help facilitate this process.

Recommendations:

- Actions identified with units throughout the visit should be delivered at a local level and progress monitored by Directorate Heads and the Trust smokefree policy steering group.
- Estates department to communicate out to all units/premises the legal requirements for correct smokefree signage to be in place at all times and issue with immediate effect any signage which is required.
- Applications and approval for outdoor shelters in some residential units should be dealt with as soon as possible. Liaison with estates department and the local authority is strongly advised to ensure full compliance.
- Staff training in brief intervention and stop smoking support is extremely valuable and therefore recommend that Trusts fully utilise training available to them at a regional and local level. Good access to NRT and other NICE approved smoking cessation products is essential to enable patient support.
- Increase communication at all levels to ensure full compliance with the smokefree legislation and consistent implementation of the Trust policy.

Regional round up - Spotlight on the West Midlands

In December 2007 CSIP West Midlands launched its **Smokefree Mental Health Support Programme** to offer advice and assistance to the NHS, VCS and private mental health services with the run up to 1 July 2008. The programme of work was funded through the Department of Health and CSIP and coordinated by CSIP West Midlands.

The programme aims to increase capacity and improve provision of smoking cessation support for mental health service users (and those in the community with mental health issues) by engaging with local mental health providers and NHS local stop smoking services. A key outcome of the programme is strengthened partnership working between these services.

The programme will also provide refresher training for NHS stop smoking staff and Level 2 training for mental health service staff.

Two 'demonstration sites' have been identified and set up - one focusing on providing training to mental health staff with the other exploring smoking cessation provision to mental health service clients in the community.

'a key outcome of the programme is strengthened partnership working between these services'

Rethink (West Midlands), the leading national mental health charity, was also appointed to support the programme until March. The organisation has made an enormous impact on the project by engaging with more than 80 statutory, independent and voluntary mental health services across the region.

On 30 April a conference was held in Birmingham to highlight the success and progress of the programme to date and to showcase the demonstration sites. Presentations took place from both sites, local stop smoking services, Birmingham & Solihull Mental Health Trust, who are already smokefree, and the TCCC.

The event achieved an excellent turn out with more than 70 delegates in attendance. There was an excellent mix of smoking cessation staff, local mental health providers and service users, proving the partnership working is going strong.

NHS Stop Smoking Services Perspective



Case Study

The West Midlands' event highlighted a lovely story of a service user who gave up smoking and now runs a support group in Birmingham:

Michael Poller had suffered with chest problems for many years, but had accepted it as a way of life. However, when things got really bad he was persuaded to see his GP who suggested he give up smoking. Michael was given advice and put on NRT patches. Unfortunately he had very bad withdrawal symptoms from the patches and after two weeks he really thought he wasn't going to make it. However, he was determined to quit and decided to go on long walks, listen to relaxation tapes, and drink plenty of water. He still found the first six weeks very hard, but felt much more positive that he would be able to make it.

Michael has been quit for almost two years now and feels that his physical and mental wellbeing is much improved as a result.

So much so that Michael now runs support groups at the Beechcroft Day Centre - MIND, in Birmingham, and feels his experience is beneficial to others wanting to quit as he's actually gone through the process. He is currently supporting two service users that have cut down considerably and two that are still heavy smokers but aiming to cut down very soon.

Michael was actually at the conference and was very keen to share his experience with others in this newsletter. He has kindly given us permission to use his story.

Smoking cessation courses for mental health service users

A London-based partnership research initiative – can you help?

Over the last year or so, Harrow Mental Health Service has been running specialised group-based courses to assist mental health service users to quit smoking, in partnership with the Harrow Stop Smoking service.

The course offers more intensive support than is normally available from locality based Stop Smoking groups, including information and psychological coping skills training specifically tailored to meet the needs of those with mental health problems.

In order to establish the effectiveness of this approach with a sufficiently large sample, the research project needs to be repeated in other London boroughs.

If you would be interested in helping to facilitate a course in your borough, please contact Di Hurley by email at: di.hurley@nhs.net or telephone 0208 869 2302

Smokefree mental health resources

CIGLOW Industrial Services Limited offers a wide range of internal and external 'safe area' automatic electric cigarette lighters that are suitable in establishments where having naked flames is a health and safety risk. The units work by heating an element on the front of the unit to a glow which enables the safe lighting of cigarettes thereby eliminating the use of matches and lighters.

Contact details: Tel 0151 709 8800; email: contactus@ciglows.co.uk;
www.ciglows.co.uk



Over to you ...

You've heard enough about the TCCC so now it's over to you. We would be very interested to hear about how your organisation is managing to become smokefree, or, if it already is, perhaps some of the challenges you faced along the way.

If you have any issues, news or events that you would like us to include in the next newsletter, we'd love to hear from you.

Please send details to the contact details shown below.

Next Issue

The next issue of 'Smokefree' will be issued in June 2008. If you have any issues, news or events that you would like us to include, we'd love to hear from you.

Please contact Barbara at the Centre on 01926 490190 or email: tcc@tobaccocontrolcentre.org.uk

The deadline for receipt of articles for the June issue is 23 May 2008.

Please ensure all materials are sent to the Centre by this date.