



West Coast District Health Board

Te Poari Hauora a Rohe o Tai Poutini

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18 February 2020

9(2)(a)

Official Information Request WCDHB 9386

I refer to your email dated 29 January 2020 requesting the following information under the Official Information Act from West Coast DHB.

- 1. Smoke-free policies (tobacco and/or vaping), including any specific to mental health inpatient facilities, used by West Coast DHB between and including the years 2000 – 2019.**
- 2. Policies related to smoking (tobacco), including any specific to mental health inpatient facilities, used by the former CHE and Health and Hospital Services between and including the years 1993-1999.**

Smokefree policies are attached as **Appendices 1-8** for your reference.

- 1 Workplace Smokefree Policy 2001
- 2 Workplace Smokefree Policy 2008
- 3 Workplace Smokefree Policy 2011
- 4 Workplace Smokefree Policy 2012
- 5 Workplace Smokefree Policy 2015
- 6 Workplace Smokefree Policy 2017
- 7 Workplace Smokefree Policy 2019
- 8 Smoking Cessation Policy for inpatients 2018

These date back to 2001, however please note these have been reviewed and updated from the original document date of 1991. The West Coast DHB no longer holds copies of any related policies prior to the 2001 version. We are therefore declining to provide these pursuant to section 18(g) of the Official Information Act.


I trust that this satisfies your interest in this matter.

You may, under section 28(3) of the Official Information Act, seek a review of our decision to withhold information by the Ombudsman. Information about how to make a complaint is available at www.ombudsman.parliament.nz; or Freephone 0800 802 602.

Please note that this response, or an edited version of this response, may be published on the West Coast DHB website after your receipt of this response.

Yours sincerely

Carolyn Gullery
Executive Director
Planning, Funding & Decision Support

	Smoke-Free Workplace Policy and Procedure	Policy Number CHC-OSH-0009	Version Nos: 3
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1. Policy Statement

This Policy and Procedure have been developed to ensure that Coast Health Care (CHC) complies with the requirements of the requirements of the Smoke-free Environments Act 1990 and subsequent Amendments., and to prevent (so far as it is reasonably practicable) the detrimental effects of smoking on the health of any person who does not smoke or who does not wish to smoke inside any CHC building or vehicle. By November 30 2002 all CHC facilities will be smoke-free.

2. Purpose

To meet the requirements of the Act and to prevent (where it is reasonably practicable to do so) the detrimental effects of smoking on the health and well-being of the staff patients and visitor to CHC.

3. Application

This Policy and Procedure applies to all CHC staff members, CHC patients and visitors to CHC.

4. Definitions

For the purposes of this Policy and Procedure:

“**approved smoking area**” is taken to mean any room or area in a workplace that is designated as an area in which smoking is permitted;

“**CHC facility**” is taken to mean any indoor or enclosed area that is occupied by CHC and that CHC staff members usually frequent during the course of their work and includes corridors, offices, lifts, lobbies, stairwells, toilets, washroom and enclosed common areas.

“**staff member**” is taken to mean individuals employed directly by CHC, those employed by CHC contractors, and those undertaken voluntary activities for CHC.

5. Responsibilities

For the purpose of this Policy and Procedure:

The **Chief Executive Officer** (CEO) shall:

- delegate responsibility for the implementation and monitoring of this Policy and Procedure to Service Managers.

General Managers shall:

- monitor the implementation of this Policy and Procedure throughout their service;
- ensure all new employees to their service are made familiar with the requirements of this Policy and Procedure;
- grant permission to smoke to patients where patients are restricted to a smoke-free area of CHC and have made an official application;
- ensure that permission is withdrawn from patients to smoke once the patients are able to move to a designated smoking area, or are discharged;
- receive, investigate and resolve complaints made regarding breaches of this Policy and Procedure;

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- assist staff members to cease smoking by seeking advice from appropriate professionals.

All ***Heads of Departments/Unit Nurse Managers/Patient Service Co-ordinators*** shall:

- monitor the implementation of this Policy and Procedure within their area of responsibility;
- facilitate the application process for patients wishing to apply for permission to smoke within smoke-free areas;
- assist patients and staff members to cease smoking by seeking advice from appropriate professionals.

All ***Staff Members*** shall:

- comply with the requirements of this Policy and Procedure;
- inform their manager of any breaches of this Policy and Procedure.

All ***Patients, Visitors and Contractors*** shall:

- comply with the requirements of this Policy and Procedure.

6. Resources Required

- Application form for patients wishing to apply for permission to smoke within smoke-free areas;
- No-Smoking Signs
- CHC Smoking Policy and Procedure signs.

7. Process

1.00 INTRODUCTION

1.02 CHC acknowledges its' statutory obligation under the Smoke-free Environments Act 1990 and subsequent amendments.

2.00 SMOKE FREE FACILITIES

2.01 All CHC buildings, facilities and vehicles are smoke-free in compliance with the Act with the exception of:

Buller Hospital:


- Room adjacent to Cafeteria between Foote and Dunsford Wards;
- East Wing Solarium in Kynnersley Home;

Grey Base Hospital:

- Patio area between Mental Health Unit and Laboratory; OR
- Patio area outside the Library; OR
- Area outside Hannan Ward (across from airport); OR
- Area between Community Services and physiotherapy Department.

Reefton Hospital:

- Zinnan House lounge on Shiel Street;

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Seaview Hospital:

Ruru:

- staff lounge next to staff morning tea room
- south end verandah (*patients only*)

Huia:

- back room – ex office (*staff only*)
- north lounge (*patients only*)
- south lounge balcony (*patients only*)

- 2.02 All CHC staff members are not permitted to smoke except in the designated areas and may not smoke when:
- they are performing their work duties;
 - they are at staff meetings;
 - in uniform in view of patients, visitors or members of the public;
 - they are in CHC vehicles.
- 2.03 CHC staff members who wish to leave CHC facilities to smoke may only do so during designated meal/tea breaks.
- 2.04 If staff members wish to smoke within an enclosed area which they occupy exclusively and to which the public normally do not have access, they may make written application to the CEO requesting smoking be permitted there and that they do not object to the area being designated an approved smoking area.
- 2.05 Upon receiving a request, the CEO may take whatever steps they deem necessary to determine the appropriateness of the granting of the request and shall inform the applicants in writing of the decision. However, the CEO is under no obligation to grant a request
- 2.06 Each General Manager is responsible for ensuring that copies of this Policy and Procedure are clearly displayed throughout their service.
- 2.07 All new staff, relieving staff and contractors will be informed of this Policy and Procedure by their relevant Manager.

3.00 PATIENT PERMISSION TO SMOKE AGREEMENTS

- 3.01 If a patient is unable to move from a non-smoking area to a designated smoking area they may make a formal application to the relevant Service Manager for permission to smoke in the non-smoking area.
- 3.02 The General Manager shall issue a Permission to Smoke Agreement which shall contain a review date and shall be kept in the patients clinical record.
- 3.03 When a Permission to Smoke Agreement is granted, the General Manager shall ensure that all practicable steps are taken to ensure that other persons in the vicinity of the patient who has been granted permission to smoke will not be adversely affected by the smoke.

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3.04 A Permission to Smoke Agreement will remain in force until:

- the stated review date is reached; or
- the patient is discharged; or
- the patient is able to move to a designated smoking area.

3.05 At the time of the stated review, the Agreement will be reviewed and will only be continued if the patient is still unable to move from a non-smoking area to a designated smoking area.

4.0 0 COMPLAINTS

4.01 All CHC staff members are authorised to instruct CHC patients and visitors to comply with the requirements of this Policy and Procedure, and are to report any suspected breaches of this Policy and Procedure to their Manager.

4.02 Any complaint relating to breaches of this Policy and Procedure will be dealt with under the provisions of the CHC Complaints Procedure, and must be made to the relevant General Manager.

4.03 Any breach of this Policy and Procedure by staff members will be dealt with under the provisions of the CHC Staff Discipline Policy and Procedure.

5.00 REVIEW OF POLICY AND PROCEDURE

5.01 This Policy and Procedure will be reviewed annually, in consultation with employees, to ensure compliance with Section 5(5) of the Smoke-free Workplace Environments Act 1990 and subsequent amendments.

7. Legislative Requirements

Smoke Free Environments Act (1990)
Health and Safety in Employment Act (1992)


8. Related Procedures

CHC Complaints Procedure

9. Reference Documents

Healthcare Otago Smoking Policy

Revision History	Version:	3
	Developed By:	Human Resource Department
	Authorised By:	Chief Executive Officer
	Date Authorised:	December 1991
	Date Last Reviewed:	March 2001
	Date Of Next Review:	March 2002

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RELEASED UNDER THE OFFICIAL INFORMATION ACT

Smoke-Free Workplace Policy And Procedure

1. Policy Statement

This Policy and Procedure has been developed to ensure that West Coast District Health Board (WCDHB) complies with the requirements of the Smoke-free Environments Act 1990 and subsequent Amendments, and to prevent (so far as it is reasonably practicable) the detrimental effects of smoking on the health of any person who does not smoke or who does not wish to smoke inside any WCDHB building or vehicle, including all WCDHB sites.

2. Purpose

To meet the requirements of the Act and to prevent (where it is reasonably practicable to do so) the detrimental effects of smoking on the health and well-being of the staff, patients and visitors to WCDHB.

3. Application

This Policy and Procedure applies to all WCDHB staff members, WCDHB patients and visitors to WCDHB.

4. Definitions

For the purposes of this Policy and Procedure:

“**Approved Smoking Area**” is taken to mean any room or area in a workplace that is designated as an area in which smoking is permitted for patients with an approved exemption only;

“**WCDHB Facility**” is taken to mean any indoor, enclosed or outdoor area that is occupied by WCDHB and that WCDHB staff members usually frequent during the course of their work and includes corridors, offices, lifts, lobbies, stairwells, toilets, washroom and enclosed common areas.

“**Staff Member**” is taken to mean individuals employed directly by WCDHB, those employed by WCDHB contractors, and those undertaken voluntary activities for WCDHB.

5. Responsibilities

For the purpose of this Policy and Procedure:

The **Chief Executive Officer** (CEO) shall:

- delegate responsibility for the implementation and monitoring of this Policy and Procedure to Managers.

General Managers shall:

- monitor the implementation of this Policy and Procedure throughout their service;
- ensure all new employees to their service are made familiar with the requirements of this Policy and Procedure;
- grant permission to smoke to patients where patients are restricted to a smoke-free area of WCDHB and have made an official application;
- ensure that permission is withdrawn from patients to smoke once the patients are able to move outside WCDHB facilities / grounds, or are discharged;

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- receive, investigate and resolve complaints made regarding breaches of this Policy and Procedure;
- assist staff members to cease smoking by seeking advice from appropriate professionals.

All **Management** shall:

- monitor the implementation of this Policy and Procedure within their area of responsibility;
- facilitate the application process for patients wishing to apply for permission to smoke within smoke-free areas;
- assist patients and staff members to cease smoking by seeking advice from appropriate professionals.

All **Staff Members** shall:

- comply with the requirements of this Policy and Procedure;
- inform their manager of any breaches of this Policy and Procedure.

All **Patients, Visitors and Contractors** shall:

- comply with the requirements of this Policy and Procedure.

6. Resources Required

- Application form for patients wishing to apply for permission to smoke within smoke-free areas;
- No-Smoking Signs
- WCDHB Smoking Policy and Procedure signs.
- Intention to Leave Ground Form
- Nicotine Dependent Patient Guidelines for Management
- Smokefree Workplace Policy and Procedure Guide Pamphlet

7. Process

1.00 INTRODUCTION

1.02 WCDHB acknowledges its statutory obligation under the Smoke-free Environments Act 1990 and subsequent amendments.

2.00 SMOKE FREE FACILITIES

2.01 All WCDHB buildings, facilities, vehicles and grounds are smoke-free in compliance with the Act. Patients who are granted exemption / permission to smoke within the WCDHB, will be restricted to the following areas:

Buller Hospital:

- Room adjacent to Cafeteria between Foote and Dunsford Wards;
- East Wing Solarium in Kynnersley Home;
- Ambulance Bay

Grey Base Hospital:

- Patio area outside Manaakitanga
- Area outside Hannan Ward (across from airport, lower ground floor); OR
- Area outside entrance to Hospital by Parfitt Unit

Reefton Hospital:

- Ziman House lounge on Shiel Street;
- Area outside kitchen

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Seaview Hospital:

Ruru:

- south end verandah

- 2.02 All WCDHB staff members are not permitted to smoke within any WCDHB building, vehicles or on the grounds
- 2.03 WCDHB staff members who wish to leave WCDHB facilities to smoke may only do so during designated meal/tea breaks. Those staff members who have close contact with patients are requested to minimise the cigarette smoke contamination of their clothing by wearing over jackets.
- 2.04 Each General Manager is responsible for ensuring that copies of this Policy and Procedure are clearly displayed throughout their service.
- 2.05 All new staff, relieving staff and contractors will be informed of this Policy and Procedure by their relevant Manager during their Orientation.

3.00 PATIENT PERMISSION TO SMOKE AGREEMENTS

- 3.01 If a patient is unable to move from a non-smoking area to a designated smoking area they may make a formal application to their clinician (nurse/doctor) for permission to smoke in the non-smoking area.
- 3.02 The clinician shall issue a Permission to Smoke Agreement which shall contain a review date and shall be kept in the patients clinical record.
- 3.03 When a Permission to Smoke Agreement is granted, the clinician shall ensure that all practicable steps are taken to ensure that other persons in the vicinity of the patient who has been granted permission to smoke will not be adversely affected by the smoke.
- 3.04 A Permission to Smoke Agreement will remain in force until:
 - the stated review date is reached; or
 - the patient is discharged; or
 - the patient is able to move outside the premises/facilities/grounds.
- 3.05 At the time of the stated review, the Agreement will be reviewed and will only be continued if the patient is still unable to move.

4.00 COMPLAINTS

- 4.01 All WCDHB staff members are authorised to instruct WCDHB patients and visitors to comply with the requirements of this Policy and Procedure, and are to report any suspected breaches of this Policy and Procedure to the appropriate General Manager/Senior Manager.

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- 4.02 Any complaint relating to breaches of this Policy and Procedure will be dealt with under the provisions of the WCDHB Complaints Procedure, and must be made to the appropriate General Manager/Senior Manager.
- 4.03 Any breach of this Policy and Procedure by staff members will be dealt with under the provisions of the WCDHB Staff Discipline Policy and Procedure.

5.00 REVIEW OF POLICY AND PROCEDURE

- 5.01 This Policy and Procedure will be reviewed biennially in consultation with employees, to ensure compliance with Section 5(5) of the Smoke-free Workplace Environments Act 1990 and subsequent amendments.

7. Legislative Requirements

Smoke Free Environments Act (1990) and subsequent Amendments (2003)

Health and Safety in Employment Act (1992) and subsequent Amendments (2002)

8. Related Procedures

WCDHB Complaints Procedure


WCDHB Staff Discipline Procedure

9. Reference Documents

Healthcare Otago Smoking Policy

Auckland DHB Nicotine Dependent Patient Guidelines for Management

Revision History	Version:	7
	Developed By:	Human Resources & Smoking Cessation Coordinator
	Authorised By:	Chief Executive Officer
	Date Authorised:	December 1991
	Date Last Reviewed:	November 2006
	Date Of Next Review:	November 2007

	Smoke-Free Workplace Policy and Procedure	Policy Number <i>WCDHB-OSH-0009</i>	Version Nos: 10
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1. Purpose

The purpose of this Policy is to describe the West Coast District Health Board's Smokefree strategies and systems to encourage and support smokefree lifestyles for all.

West Coast District Health Board(WCDHB) has a significant leadership responsibility within the West Coast community and this policy is designed to demonstrate and model health leadership.

WCDHB, as an employer, is legally obligated to protect the health and safety of employees and visitors to its workplaces (includes hospital patients and visitors) from the effects of identified hazards which includes second hand smoke.


As a funder of publicly-funded health and disability support services within the West Coast community, WCDHB expects/requires that all contracted providers of services will implement appropriate smokefree policies.

As a provider of health services, WCDHB has an obligation to ensure patients receive a standard of care that is consistent with current evidence-based best-practice. This requires that the smokefree status of every patient is identified and documented; that every smoke-exposed patient is provided with appropriate information and support to become smokefree; and that staff are appropriately skilled and knowledgeable.

2. Policy Statement

The WCDHB requires that:

- All WCDHB buildings and vehicles will be smokefree – no exceptions.
- All WCDHB outdoor areas will be smokefree
- All privately owned vehicles whilst on WCDHB grounds will be smokefree.
- All WCDHB patients/clients will be asked about their smoking status as part of their admissions process.
- All WCDHB patients/clients identified as smoke exposed will be offered appropriate smoke free interventions.
- All WCDHB inpatients who are assessed as at risk of nicotine dependence will be offered the option of assistance in the management of their nicotine dependency.
- All WCDHB staff will receive smokefree education appropriate to their role and responsibilities.
- Responsibility for the coordination of smokefree activities within the WCDHB will be assigned to a clearly dedicated staff member.
- All WCDHB employees will have access to smokefree support services.
- All providers of health and disability services funded by the WCDHB will have written contractual obligations outlining the establishment and implementation of appropriate smokefree policies
- The WCDHB will provide an appropriate range and volume of cessation services.

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4. Scope

This Policy applies to all WCDHB services: to all staff; to all patients/clients, visitors, volunteers, contractors and others working on or accessing WCDHB sites; and to all contracted service providers.

5. Roles & Responsibilities

For the purpose of this Smokefree/Auahi Kore Policy:

The Chief Executive Officer (CEO)/Executive Management Team shall have responsibility for:

- Supporting and resourcing activities and systems to achieve and maintain the objectives of this Policy.

WCDHB Smokefree committee will meet quarterly to:

Monitoring compliance with

- Smokefree patient identification systems
- Smokefree patient intervention systems throughout inpatient and outpatient services at all WCDHB sites.
- Reports to monitor compliance will be generated and distributed to the CEO and Executive management Team Assistant for attention and action as required.
- Ensuring appropriate communications to patients/clients and visitors and that the wider community is informed of the WCDHB Smokefree / Auahi Kore policy.

Planning and Funding will have responsibility for:

- Ensuring all contracted providers will establish and implement appropriate Smokefree / Auahi Kore policies.
- Ensuring appropriate range and level of cessation services are available, to complement services provided nationally, to meet the cessation needs of all members of the community.

Human Resources Team will have responsibility for:


- Ensuring Smokefree information included all WCDHB job descriptions and Orientation Programmes for new staff

Occupational Safety and Health Team will have responsibility for:

- Supporting, implementing and monitoring systems to support WCDHB employees to become smokefree.

Smoking Cessation Advisors / Practitioners will have responsibility for:

- Providing a Quit Smoking program.
- Assisting in the provision of smokefree education to staff.

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Service Managers / Unit Managers / Team Leaders / Clinical Nurse Managers will have responsibility for:

- Supporting systems in Clinical areas to achieve 100% smokefree patient/client status identification.
- Supporting systems in Clinical areas to achieve 100% smokefree patient/client interventions to those identified as smoke-exposed.
- Ensuring all staff within their service understand and comply with this policy.
- Investigating and managing breaches of this policy by staff, patients/clients and visitors.
- Ensuring all staff in their area participate in smokefree education appropriate to their role.
- Ensuring all staff in their area are aware of smokefree support services for them.
- Promoting and encouraging a smokefree lifestyle to all staff, patients/clients and visitors.

All WCDHB Staff will have responsibility for:

- Promoting and encouraging a smokefree lifestyle to all staff, patients/clients and visitors.
- Complying with the Smokefree / Auahi Kore Policy.
- Informing patients/clients and visitors of the WCDHB Smokefree / Auahi Kore Policy.

All patients/clients, visitors and volunteers will have responsibility for:

- Complying with all relevant WCDHB Policies and Procedures

7. Legislative Requirements

Smoke Free Environments Act (1990) and subsequent Amendments (2003)

Health and Safety in Employment Act (1992) and subsequent Amendments (2002)

8. Related Procedures

WCDHB Management of Nicotine Dependent patients

WCDHB Complaints Procedure

WCDHB Staff Discipline Procedure

WCDHB Health and Safety Policy


WCDHB Visitor and Support Person Procedure

9. Reference Documents & References

Haw's Bay District Health Board Smokefree/ Auahi Kore Policy

System First Draft Smokefree Policy

Fiore MC, Bailey WC, Cohen SJ, et al. Treating Tobacco Use and Dependence. Clinical Practice Guideline. Rockville MD: US Department of Health and Human Services. Public Health Services. June 2000

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Revision History	Version:	10
	Developed By:	Smokefree Coordinator & Quality Risk Manager
	Authorised By:	Chief Executive Officer
	Date Authorised:	December 1991
	Date Last Reviewed:	January 2011
	Date Of Next Review:	January 2012

RELEASED UNDER THE OFFICIAL INFORMATION ACT



Smoke-Free Workplace Policy and Procedure

1. Purpose

The purpose of this Policy is to describe the West Coast District Health Board's Smokefree strategies and systems to encourage and support smokefree lifestyles for all.

West Coast District Health Board(WCDHB) has a significant leadership responsibility within the West Coast community and this policy is designed to demonstrate and model health leadership.

WCDHB, as an employer, is legally obligated to protect the health and safety of employees and visitors to its workplaces (includes hospital patients and visitors) from the effects of identified hazards which includes second hand smoke.

As a funder of publicly-funded health and disability support services within the West Coast community, WCDHB expects/requires that all contracted providers of services will implement appropriate smokefree policies.

As a provider of health services, WCDHB has an obligation to ensure patients receive a standard of care that is consistent with current evidence-based best-practice. This requires that the smokefree status of every patient is identified and documented; that every smoke-exposed patient is provided with appropriate information and support to become smokefree; and that staff are appropriately skilled and knowledgeable.

2. Policy Statement

The WCDHB requires that:

- All WCDHB buildings and vehicles will be smokefree – no exceptions.
- All WCDHB outdoor areas will be smokefree
- All privately owned vehicles whilst on WCDHB grounds will be smokefree.
- All WCDHB patients/clients will be asked about their smoking status as part of their admissions process.
- All WCDHB patients/clients identified as smoke exposed will be offered appropriate smoke free interventions.
- All WCDHB inpatients who are assessed as at risk of nicotine dependence will be offered the option of assistance in the management of their nicotine dependency.
- All WCDHB staff will receive smokefree education appropriate to their role and responsibilities.
- Responsibility for the coordination of smokefree activities within the WCDHB will be assigned to a clearly dedicated staff member.
- All WCDHB staff will not smoke when wearing WCDHB uniform or ID badge.
- All WCDHB employees will have access to smokefree support services.
- All providers of health and disability services funded by the WCDHB will have written contractual obligations outlining the establishment and implementation of appropriate smokefree policies
- The WCDHB will provide an appropriate range and volume of cessation services.

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3 Scope

This Policy applies to all WCDHB services: to all staff; to all patients/clients, visitors, volunteers, contractors and others working on or accessing WCDHB sites; and to all contracted service providers.

4. Roles & Responsibilities

For the purpose of this Smokefree/Auahi Kore Policy:

The Chief Executive Officer (CEO)/Executive Management Team shall have responsibility for:

- Supporting and resourcing activities and systems to achieve and maintain the objectives of this Policy.

WCDHB smokefree service development manager, smokefree services co-ordinator, and quality and patient safety manager will meet regularly to:

- ensure appropriate communication of the policy to patients/clients and visitors; and
- monitor smokefree patient identification and intervention systems throughout inpatient and outpatient services at all WCDHB sites. Reports to monitor compliance will be generated and distributed to the CEO and executive management team assistant for attention and action as required.

Planning and Funding will have responsibility for:

- Ensuring all contracted providers will establish and implement appropriate Smokefree / Auahi Kore policies.
- Ensuring appropriate range and level of cessation services are available, to complement services provided nationally, to meet the cessation needs of all members of the community.

Human Resources Team will have responsibility for:

- Ensuring Smokefree information included all WCDHB job descriptions and Orientation Programmes for new staff

Occupational Safety and Health Team will have responsibility for:

- Supporting, implementing and monitoring systems to support WCDHB employees to become smokefree.

Smoking Cessation Advisors / Practitioners will have responsibility for:

- Providing a Quit Smoking program.
- Assisting in the provision of smokefree education to staff.

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Registered Nurses

- Assessment of the level of tobacco / nicotine dependence of all newly admitted patients
- Provision of NRT to reduce nicotine withdrawals for patients
- Referring current smokers to the Smoking Cessation team for additional support for stopping tobacco use

Service Managers / Unit Managers / Team Leaders / Clinical Nurse Managers will have responsibility for:

- Supporting systems in Clinical areas to achieve 100% smokefree patient/client status identification.
- Supporting systems in Clinical areas to achieve 100% smokefree patient/client interventions to those identified as smoke-exposed.
- Ensuring all staff within their service understand and comply with this policy.
- Investigating and managing breaches of this policy by staff, patients/clients and visitors.
- Ensuring all staff in their area participate in smokefree education appropriate to their role.
- Ensuring all staff in their area are aware of smokefree support services for them.
- Promoting and encouraging a smokefree lifestyle to all staff, patients/clients and visitors.

All WCDHB Staff will have responsibility for:

- Promoting and encouraging a smokefree lifestyle to all staff, patients/clients and visitors.
- Complying with the Smokefree / Auahi Kore Policy.
- Informing patients/clients and visitors of the WCDHB Smokefree / Auahi Kore Policy.

All patients/clients, visitors and volunteers will have responsibility for:

- Complying with all relevant WCDHB Policies and Procedures

5. Legislative Requirements

Smoke Free Environments Act (1990) and subsequent Amendments (2003)

Health and Safety in Employment Act (1992) and subsequent Amendments (2002)

6. Related Procedures

WCDHB Management of Nicotine Dependent patients

WCDHB Complaints Procedure

WCDHB Staff Discipline Procedure

WCDHB Health and Safety Policy

WCDHB Visitor and Support Person Procedure

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7. Reference Documents & References

Hawke's Bay District Health Board Smokefree/ Auahi Kore Policy

System First Draft Smokefree Policy

Fiore MC, Bailey WC, Cohen SJ, et al. Treating Tobacco Use and Dependence. Clinical Practice Guideline. Rockville MD: US Department of Health and Human Services. Public Health Services. June 2000

New Zealand Smoking Cessation Guidelines. Ministry of Health, 2007.

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Smoke-Free Workplace Policy and Procedure

1. Purpose

The purpose of this Policy is to describe the West Coast District Health Board's Smokefree strategies and systems to encourage and support smokefree lifestyles for all.

West Coast District Health Board (WCDHB) has a significant leadership responsibility within the West Coast community and this policy is designed to demonstrate and model health leadership.

West Coast District Health Board endorses and supports the goal of Smokefree Aotearoa-New Zealand 2025.

WCDHB, as an employer, is legally obligated to protect the health and safety of employees and visitors to its workplaces (includes hospital patients and visitors) from the effects of identified hazards which includes second hand smoke.

As a funder of publicly-funded health and disability support services within the West Coast community, WCDHB expects/requires that all contracted providers of services will implement appropriate smokefree policies.

As a provider of health services, WCDHB has an obligation to ensure patients receive a standard of care that is consistent with current evidence-based best-practice. This requires that the smokefree status of every patient is identified and documented; that every smoke-exposed patient is provided with appropriate information and support to become smokefree; and that staff are appropriately skilled and knowledgeable.

2. Policy Statement

The WCDHB requires that:

- All WCDHB buildings and vehicles will be smokefree – no exceptions
- All WCDHB outdoor areas will be smokefree
- All privately owned vehicles whilst on WCDHB grounds will be smokefree
- All WCDHB patients/clients will be asked about their smoking status as part of their admissions process
- All WCDHB patients/clients identified as smoke exposed will be offered appropriate smoke free interventions
- All WCDHB inpatients who are assessed as at risk of nicotine dependence will be offered the option of assistance in the management of their nicotine dependency
- All WCDHB staff will receive smokefree education appropriate to their role and responsibilities
- Responsibility for the coordination of smokefree activities within the WCDHB will be assigned to a clearly dedicated staff member
- All WCDHB staff will not smoke when wearing WCDHB uniform or ID badge

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- West Coast DHB staff will not smoke with patients/clients while on duty, even if staff are off-site and not wearing WCDHB uniform or ID badge
- All WCDHB employees will have access to smokefree support services
- All providers of health and disability services funded by the WCDHB will have written contractual obligations outlining the establishment and implementation of appropriate smokefree policies
- The WCDHB will provide an appropriate range and volume of cessation services

3. Scope

This Policy applies to all WCDHB services: to all staff; to all patients/clients, visitors, volunteers, contractors and others working on or accessing WCDHB sites; and to all contracted service providers.

4. Roles & Responsibilities

For the purpose of this Smokefree/Auahi Kore Policy:

The Chief Executive Officer (CEO)/Executive Management Team shall have responsibility for:

- Supporting and resourcing activities and systems to achieve and maintain the objectives of this Policy

WCDHB smokefree service development manager, smokefree services co-ordinator, and quality and patient safety manager will meet regularly to:

- ensure appropriate communication of the policy to patients/clients and visitors; and
- monitor smokefree patient identification and intervention systems throughout inpatient and outpatient services at all WCDHB sites. Reports to monitor compliance will be generated and distributed to the CEO and executive management team assistant for attention and action as required

Planning and Funding will have responsibility for:

- Ensuring all contracted providers will establish and implement appropriate Smokefree / Auahi Kore policies
- Ensuring appropriate range and level of cessation services are available, to complement services provided nationally, to meet the cessation needs of all members of the community

Human Resources Team will have responsibility for:

- Ensuring Smokefree information included all WCDHB Job Descriptions and Orientation Programmes for new staff

Occupational Safety and Health Team will have responsibility for:

- Supporting, implementing and monitoring systems to support WCDHB employees to become smokefree

Smoking Cessation Advisors / Practitioners will have responsibility for:

- Providing a Quit Smoking programme
- Assisting in the provision of smokefree education to staff

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Registered Nurses

- Assessment of the level of tobacco / nicotine dependence of all newly admitted patients
- Provision of NRT to reduce nicotine withdrawals for patients
- Referring current smokers to the Smoking Cessation team for additional support for stopping tobacco use

Service Managers / Unit Managers / Team Leaders / Clinical Nurse Managers will have responsibility for:

- Supporting systems in Clinical areas to achieve 100% smokefree patient/client status identification
- Supporting systems in Clinical areas to achieve 100% smokefree patient/client interventions to those identified as smoke-exposed
- Ensuring all staff within their service understand and comply with this policy
- Investigating and managing breaches of this policy by staff, patients/clients and visitors
- Ensuring all staff in their area participate in smokefree education appropriate to their role
- Ensuring all staff in their area are aware of smokefree support services for them
- Promoting and encouraging a smokefree lifestyle to all staff, patients/clients and visitors

All WCDHB Staff will have responsibility for:

- Promoting and encouraging a smokefree lifestyle to all staff, patients/clients and visitors
- Complying with the Smokefree / Auahi Kore Policy
- Informing patients/clients and visitors of the WCDHB Smokefree / Auahi Kore Policy

All patients/clients, visitors and volunteers will have responsibility for:

- Complying with all relevant WCDHB Policies and Procedures

5. Legislative Requirements

Smoke Free Environments Act (1990) and subsequent Amendments (2003).

Health and Safety in Employment Act (1992) and subsequent Amendments (2002).

6. Related Procedures

WCDHB Management of Nicotine Dependent patients.

WCDHB Complaints Procedure.

WCDHB Staff Discipline Procedure.

WCDHB Health and Safety Policy.

WCDHB Visitor and Support Person Procedure.

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7. Reference Documents & References

Hawke's Bay District Health Board Smokefree/ Auahi Kore Policy.

System First Draft Smokefree Policy.

The New Zealand Guidelines for Helping People to Stop Smoking. Ministry of Health, 2014.

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Smoke-Free Workplace Policy

1. Purpose

The purpose of this Policy is to describe the West Coast District Health Board's Smokefree strategies and systems to encourage and support smokefree lifestyles for all.

West Coast District Health Board (WCDHB) has a significant leadership responsibility within the West Coast community and this policy is designed to demonstrate and model health leadership.

West Coast District Health Board endorses and supports the goal of Smokefree Aotearoa-New Zealand 2025.

WCDHB, as an employer, is legally obligated to protect the health and safety of employees and visitors to its workplaces (includes hospital patients and visitors) from the effects of identified hazards which includes second hand smoke.

As a funder of publicly-funded health and disability support services within the West Coast community, WCDHB expects/requires that all contracted providers of services will implement appropriate smokefree policies.

As a provider of health services, WCDHB has an obligation to ensure patients receive a standard of care that is consistent with current evidence-based best-practice. This requires that the smokefree status of every patient is identified and documented; that every smoke-exposed patient is provided with appropriate information and support to become smokefree; and that staff are appropriately skilled and knowledgeable.

The Government intends to introduce an electronic cigarette regulatory scheme. The Ministry of Health has established a Technical Expert Advisory Group on Electronic Cigarette Product Safety. This group will provide advice on the technical aspects of the development of the regulatory scheme, such as appropriate minimum quality and safety standards in the New Zealand context. Currently the Ministry encourages people to avoid using e-cigarettes in areas where smoking is not permitted.

2. Policy Statement

The WCDHB requires that:

- All WCDHB buildings and vehicles will be smokefree – no exceptions
- All WCDHB outdoor areas will be smokefree
- All privately owned vehicles whilst on WCDHB grounds will be smokefree
- All WCDHB patients/clients will be asked about their smoking status as part of their admissions process
- All WCDHB patients/clients identified as smoke exposed will be offered appropriate smoke free interventions
- All WCDHB inpatients who are assessed as at risk of nicotine dependence will be offered the option of assistance in the management of their nicotine dependency

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- All WCDHB staff will receive smokefree education appropriate to their role and responsibilities
- Responsibility for the coordination of smokefree activities within the WCDHB will be assigned to a clearly dedicated staff member
- All WCDHB staff will not smoke when wearing WCDHB uniform or ID badge
- West Coast DHB staff will not smoke with patients/clients while on duty, even if staff are off-site and not wearing WCDHB uniform or ID badge
- All WCDHB employees will have access to smokefree support services
- All providers of health and disability services funded by the WCDHB will have written contractual obligations outlining the establishment and implementation of appropriate smokefree policies
- The WCDHB will provide an appropriate range and volume of cessation services

3. Scope

This Policy applies to all WCDHB services: to all staff; to all patients/clients, visitors, volunteers, contractors and others working on or accessing WCDHB sites; and to all contracted service providers.

Smokefree in this Policy applies to burned tobacco products (i.e. cigarettes or pipes) and electronic cigarette or vapes.

4. Roles & Responsibilities

For the purpose of this Smokefree/Auahi Kore Policy:

The Chief Executive (CE)/Executive Management Team shall have responsibility for:

- Supporting and resourcing activities and systems to achieve and maintain the objectives of this Policy

WCDHB Smokefree Service Development Manager, Smokefree Services Co-ordinator, and Quality & Patient Safety Manager will meet regularly to:

- ensure appropriate communication of the Policy to patients/clients and visitors; and
- monitor smokefree patient identification and intervention systems throughout inpatient and outpatient services at all WCDHB sites. Reports to monitor compliance will be generated and distributed to the CE and Executive Management Team Assistant for attention and action as required

Planning and Funding will have responsibility for:

- Ensuring all contracted providers will establish and implement appropriate Smokefree / Auahi Kore Policies
- Ensuring appropriate range and level of cessation services are available, to complement services provided nationally, to meet the cessation needs of all members of the community

People & Capability Team will have responsibility for:

- Ensuring Smokefree information included all WCDHB Job Descriptions and Orientation Programmes for new staff

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Occupational Safety and Health Team will have responsibility for:

- Supporting, implementing and monitoring systems to support WCDHB employees to become smokefree

Smoking Cessation Advisors / Practitioners will have responsibility for:

- Providing a Quit Smoking programme
- Assisting in the provision of smokefree education to staff

Registered Nurses

- Assessment of the level of tobacco / nicotine dependence of all newly admitted patients
- Provision of NRT to reduce nicotine withdrawals for patients
- Referring current smokers to the Smoking Cessation team for additional support for stopping tobacco use

Service Managers / Unit Managers / Team Leaders / Clinical Nurse Managers will have responsibility for:

- Supporting systems in Clinical areas to achieve 100% smokefree patient/client status identification
- Supporting systems in Clinical areas to achieve 100% smokefree patient/client interventions to those identified as smoke-exposed
- Ensuring all staff within their service understand and comply with this policy
- Investigating and managing breaches of this policy by staff, patients/clients and visitors
- Ensuring all staff in their area participate in smokefree education appropriate to their role
- Ensuring all staff in their area are aware of smokefree support services for them
- Promoting and encouraging a smokefree lifestyle to all staff, patients/clients and visitors

All WCDHB Staff will have responsibility for:

- Promoting and encouraging a smokefree lifestyle to all staff, patients/clients and visitors
- Complying with the Smokefree / Auahi Kore Policy
- Informing patients/clients and visitors of the WCDHB Smokefree / Auahi Kore Policy

All patients/clients, visitors and volunteers will have responsibility for:

- Complying with all relevant WCDHB Policies and Procedures

5. Legislative Requirements

Smoke Free Environments Act (1990) and subsequent Amendments (2003).

Health and Safety in Employment Act (1992) and subsequent Amendments (2002).

6. Related Procedures

WCDHB Nurse Initiated Medications Procedure.

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WCDHB Administering Nicotine Replacement Therapy (NRT) Workbook.

WCDHB Consumer Complaints Procedure.

WCDHB Staff Disciplinary Suspension and Dismissal Procedure.

WCDHB Occupational Health and Safety Policy.

WCDHB Visitor and Support Person Procedure.

7. Reference Documents & References

The New Zealand Guidelines for Helping People to Stop Smoking. Ministry of Health, 2014.

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Smoke-Free Workplace Policy

1. Purpose

The purpose of this Policy is to describe the West Coast District Health Board's Smokefree strategies and systems to encourage and support smokefree lifestyles for all.

West Coast District Health Board (WCDHB) has a significant leadership responsibility within the West Coast community and this policy is designed to demonstrate and model health leadership.

West Coast District Health Board endorses and supports the goal of Smokefree Aotearoa-New Zealand 2025.

WCDHB, as an employer, is legally obligated to protect the health and safety of employees and visitors to its workplaces (includes hospital patients and visitors) from the effects of identified hazards which includes second hand smoke.

As a funder of publicly-funded health and disability support services within the West Coast community, WCDHB expects/ requires that all contracted providers of services will implement appropriate smokefree policies.

As a provider of health services, WCDHB has an obligation to ensure patients receive a standard of care that is consistent with current evidence-based best-practice. This requires that the smokefree status of every patient is identified and documented; that every smoke-exposed patient is provided with appropriate information and support to become smokefree; and that staff are appropriately skilled and knowledgeable.

Individual employers and business owners decide whether or not to include vaping in their smokefree policies. The Ministry of Health is considering how best to apply risk-proportionate regulation across all tobacco products including smoked tobacco, smokeless tobacco, and vaping products. As a provider of health services, WCDHB has chosen to include vape-free and smokefree in its Workplace Policy.

2. Policy Statement

The WCDHB requires that:

- All WCDHB buildings and vehicles will be smokefree and vape-free – no exceptions
- All WCDHB outdoor areas will be smokefree and vape-free
- All privately owned vehicles whilst on WCDHB grounds will be smokefree and vape-free
- All WCDHB patients/ clients will be asked about their smoking status as part of their admissions process
- All WCDHB patients/ clients identified as smoke exposed will be offered appropriate smoke free interventions
- All WCDHB inpatients who are assessed as at risk of nicotine dependence will be offered the option of assistance in the management of their nicotine dependency
- All WCDHB staff will receive smokefree education appropriate to their role and responsibilities
- Responsibility for the coordination of smokefree activities within the WCDHB will be assigned to a clearly dedicated staff member
- All WCDHB staff will not smoke or vape when wearing WCDHB uniform or ID badge
- West Coast DHB staff will not smoke or vape with patients/ clients while on duty, even if staff are off-site and not wearing WCDHB uniform or ID badge
- All WCDHB employees will have access to smokefree support services

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- All providers of health and disability services funded by the WCDHB will have written contractual obligations outlining the establishment and implementation of appropriate smokefree policies
- The WCDHB will provide an appropriate range and volume of cessation services

3. Scope

This Policy applies to all WCDHB services: to all staff; to all patients/ clients, visitors, volunteers, contractors and others working on or accessing WCDHB sites; and to all contracted service providers.

Smokefree in this Policy applies to burned tobacco products (i.e. cigarettes or pipes) and electronic cigarette or vapes.

4. Roles & Responsibilities

For the purpose of this Smokefree/Auahi Kore Policy:

The Chief Executive (CE)/Executive Management Team shall have responsibility for:

- Supporting and resourcing activities and systems to achieve and maintain the objectives of this Policy

WCDHB Smokefree Service Development Manager, Smokefree Services Co-ordinator, and Quality & Patient Safety Manager will meet regularly to:

- ensure appropriate communication of the Policy to patients/clients and visitors; and
- monitor smokefree patient identification and intervention systems throughout inpatient and outpatient services at all WCDHB sites. Reports to monitor compliance will be generated and distributed to the CE and Executive Management Team Assistant for attention and action as required

Planning and Funding will have responsibility for:

- Ensuring all contracted providers will establish and implement appropriate Smokefree / Auahi Kore Policies
- Ensuring appropriate range and level of cessation services are available, to complement services provided nationally, to meet the cessation needs of all members of the community

People & Capability Team will have responsibility for:

- Ensuring Smokefree information included all WCDHB Job Descriptions and Orientation Programmes for new staff

Occupational Safety and Health Team will have responsibility for:

- Supporting, implementing and monitoring systems to support WCDHB employees to become smokefree

Smoking Cessation Advisors / Practitioners will have responsibility for:

- Providing a Quit Smoking programme
- Assisting in the provision of smokefree education to staff

Registered Nurses

- Assessment of the level of tobacco / nicotine dependence of all newly admitted patients

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- Provision of NRT to reduce nicotine withdrawals for patients
- Referring current smokers to the Smoking Cessation team for additional support for stopping tobacco use

Service Managers / Unit Managers / Team Leaders / Clinical Nurse Managers will have responsibility for:

- Supporting systems in Clinical areas to achieve 100% smokefree patient/client status identification
- Supporting systems in Clinical areas to achieve 100% smokefree patient/client interventions to those identified as smoke-exposed
- Ensuring all staff within their service understand and comply with this policy
- Investigating and managing breaches of this policy by staff, patients/clients and visitors
- Ensuring all staff in their area participate in smokefree education appropriate to their role
- Ensuring all staff in their area are aware of smokefree support services for them
- Promoting and encouraging a smokefree lifestyle to all staff, patients/clients and visitors

All WCDHB Staff will have responsibility for:

- Promoting and encouraging a smokefree lifestyle to all staff, patients/clients and visitors
- Complying with the Smokefree / Auahi Kore Policy
- Informing patients/clients and visitors of the WCDHB Smokefree / Auahi Kore Policy

All patients/clients, visitors and volunteers will have responsibility for:

- Complying with all relevant WCDHB Policies and Procedures

5. Legislative Requirements

Smoke Free Environments Act (1990) and subsequent Amendments (2003).

Health and Safety in Employment Act (1992) and subsequent Amendments (2002).

6. Related Procedures

- WCDHB Nurse Initiated Medications Procedure.
- WCDHB Administering Nicotine Replacement Therapy (NRT) Workbook.
- WCDHB Consumer Complaints Procedure.
- WCDHB Staff Disciplinary Suspension and Dismissal Procedure.
- WCDHB Occupational Health and Safety Policy.
- WCDHB Visitor and Support Person Procedure.

7. Reference Documents & References

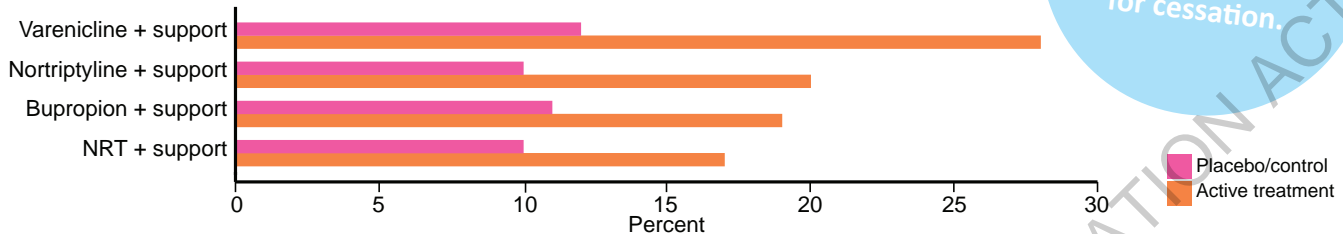
The New Zealand Guidelines for Helping People to Stop Smoking - Ministry of Health, 2014.



Smoking Cessation for Inpatients

A guideline for Clinical Staff

Long-term abstinence rates by treatment method



Hospitalisation is a window of opportunity for cessation.

Step ONE ABC every patient, every admission

- ✓ **Ask** smoking status at pre-admission + admission

→ "have you ever been a smoker?"

If **yes**: "Do you smoke now?"

"When did you last have a smoke?"

"How much do you smoke in a day?"

"Are there others at home who smoke?"

Record as non-smoker or:

Record as smoker (If any in the last 4 weeks)

Record as ex-smoker (if > 4 weeks quit)

Record if environmental exposure

- ✓ Give **Brief** advice to stop smoking

→ Explain how smoking impairs recovery and offer information on health effects

→ Advise patients that WCDHB buildings and grounds are smokefree

→ Ask "have you thought about quitting smoking? Would you like some help with this?"

- ✓ Offer referral for **Cessation** Support

→ Offer referral to DHB smoking cessation counsellor, or to other cessation programmes (Aukati Kaipapa; Coast Quit at GP or community pharmacy; Quit Line).

Record all interventions in notes and on the Electronic Discharge Summary

Step TWO Routinely recommend + prescribe NRT for smokers

Routinely recommend and prescribe NRT for smokers unless allergic to nicotine products to prevent withdrawal effects while in hospital. These effects include cravings, headache, nausea, sweating, anxiety, restlessness, inability to concentrate, insomnia, irritability and low mood.

- NRT is safe to use in people with cardiovascular disease. In-patients with acute disease who are not experiencing withdrawal don't need to use NRT. At time of discharge NRT is preferable to continuing to smoke. No dosage adjustment is needed. Include a request in the electronic discharge summary for GP follow-up on discharge.

- NRT can be used by pregnant and breastfeeding women. NRT should be offered to women if they would otherwise continue to smoke – i.e. cannot quit without it. For these women, NRT is safer than smoking. Note: during pregnancy remove patch at night.

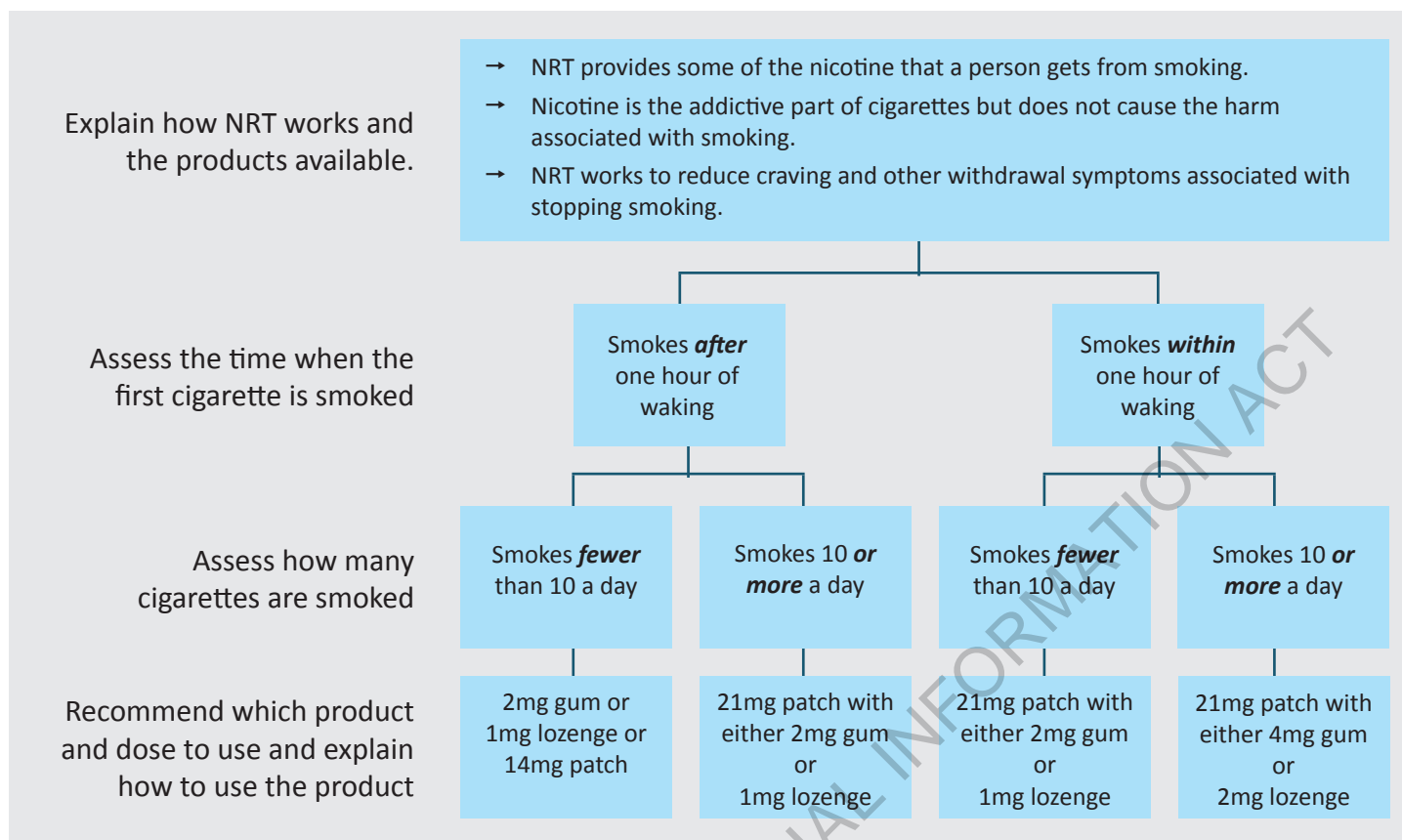
- NRT can be used in adolescents (12-18); use the product best suited to their needs.

Contra-indications to NRT include:

- Patch contra-indicated if hypersensitivity
- Remove patch before MRI scan – may cause burns
- Remove the NRT patch before surgery; re-apply a patch after waking.

Prescribing dosages

→ Review after 24 hours and adjust if required



- 15mg 'Nicorette' Inhalator is available for all patients, but it is not subsidized for outpatient prescription.
- Bupropion (Zyban), Nortriptyline, and Varenicline (Champix) are available and generally started by the patient's GP.

- 'Nicorette QuickMist' 1mg mouth spray is available for perioperative nil by mouth patients who can't use NRT lozenge or gum, or acute use with agitated patients. Not subsidised for outpatient prescription.

Note: doses of NRT that are tolerated by adult smokers during treatment can produce severe symptoms of poisoning in small children and may prove fatal. Advise safe storage of medicines.

Administration instructions

- **Patch:**
Apply to non-hairy, intact skin and wear for 24 hours. Change site of patch daily. If vivid dreams, remove at night and top-up with gum/lozenge in the morning. Watch for skin sensitivity. Use additional dressing to secure if needed. (After discharge, Opsite flexigrid dressings are available free- of-charge from Quitline).
- **Gum/Lozenge:**
Bite/suck to release peppery taste then park between gum and cheek. Repeat when taste fades. Discard after 30 minutes. Don't eat or drink while nicotine gum/lozenge are in the mouth. Avoid acidic food/drinks for the next 15 minutes.
- **15mg 'Nicorette' Inhalator:**
Use whenever craving. Use 3-6 cartridges per day. One cartridge can replace 7 cigarettes (7 sessions with 80 puffs). Use about 8-10 more puffs than if smoking a cigarette. Fewer cartridges per day are required if used in combination with nicotine patch.
- **1mg Mouth Spray:**
Prime the spray pump if it has not been used for two days or more. Point spray nozzle at side of cheek or under the tongue and press the top to release one spray. Avoid the lips. Do not spray directly into the throat. Do not inhale. 1-2 sprays at a time; maximum 4 sprays per hour.

Completing the Medication Chart

→ If NRT has been nurse- initiated, check it is countersigned within 24 hours.

Daily Dose	21mg Patch	1mg Lozenge	2mg Lozenge	2mg Gum	4mg Gum	15mg Inhalator	1mg Mouth spray
Usual	One	12 pieces	12 pieces	12 pieces	12 pieces	3 or 4 cartridges	1-2 sprays per hour (Max 4 pr hr)
Maximum	Two	25 pieces	15 pieces	20 pieces	20 pieces	6	64 sprays
Route	Top	Subling	Subling	Subling	Subling	Inh	Subling

As Required (PRN) Medicines

As Required (PRN) Medicines

Date	Medicine						
DD	N I C O T I N E L O Z E N G E						
MM	Dose	Units	Route	Frequency	Dose calculation	Max dose/24hrs	Prescriber's signature
YY	2	Mg	Subling	Hourly	(eg. mg/kg per dose)	15	Signature
	Dose range if needed		Indication	Pharmacy & special instructions		Pharm	Sign, date and time to cancel
			NRT	Suck & park, discard after 30mins			

As Required (PRN) Medicines

Date	Medicine						
DD	N I C O T I N E M O U T H S P R A Y						
MM	Dose	Units	Route	Frequency	Dose calculation	Max dose/24hrs	Prescriber's signature
YY	1 - 2	Spray	Subling	Hourly	(eg. mg/kg per dose)	64	Signature
	Dose range if needed		Indication	Pharmacy & special instructions		Pharm	Sign, date and time to cancel
			NRT	Nil by mouth			

* Note: MAX of 32 sprays per day if also on NRT patches

Regular Medicine

Regular Medicine

Date	Medicine							Circle or actual time	
DD	N I C O T I N E P A T C H							0600	
MM	Dose	Units	Route	Frequency	Dose calculation	Prescriber's signature		0800	
YY	21	Mg	TOP	DAILY	(eg. mg/kg per dose)	Signature		1400	
	Dose range if needed		Pharmacy & special instructions		Pharm	Sign, date and time to cancel		1800	
			May be removed at night - can disturb sleep.					2200	

See page 20 of <http://www.health.govt.nz/system/files/documents/publications/background-and-recommendations-of-the-new-zealand-guidelines-for-helping-people-to-stop-smoking.pdf>

Theophylline,
Warfarin,
Clozapine, Olanzapine
Chlorpromazine and
Insulin require
monitoring during a
quit attempt.

Step THREE At Discharge

- ✓ Offer prescription/Quit Card
- ✓ Offer referral to DHB smoking cessation service or other cessation support provider
- ✓ Update the electronic discharge summary to include therapy used on ward, details of any referral made, and follow-up requests

Access the full NZ Smoking Cessation Guidelines (revised July 2014) at <http://www.health.govt.nz/publication/new-zealand-guidelines-helping-people-stop-smoking>