

## Issue

# Improving Support for Tobacco-Free Hospital Environments

**The CDC supports making the healthy choice the easy choice in every community setting.**

As major employers and health leaders, hospitals can help establish strong community norms for promoting healthy and active living through nutritious food and beverage, opportunities for physical activity, support for breastfeeding, and providing tobacco-free environments. This P2P Series presents case studies of hospitals improving their environment to better support the health of their employees and promote the mission of their organization.

## IN THIS ISSUE...

*Read how LSU Health Systems and University of Kansas Medical Center improve support for tobacco-free hospital campuses.*

## Key Considerations

- *Hospital tobacco cessation services originally intended for patients may also benefit employees.*
- *Partnerships with state quit lines can help both the hospital and quit line programs reach their cessation goals.*

## Change at the Systems Level

**Louisiana State University (LSU) Health Systems** is comprised of public hospitals across the state. When legislation mandated tobacco cessation services be provided to patients in the public hospital system, the Tobacco Control Initiative (TCI) was created. Sarah Moody-Thomas, Clinical Lead of TCI, remembers early decisions about how to provide cessation services through the hospital, "I decided there would be a spaced approach, that we would assess what was going on in the hospitals and systematically implement system change." TCI hired a cessation services coordinator at each hospital and found ways to identify smokers to provide cessation services. As the system evolved over the years, TCI incorporated electronic health records and started training providers on how to counsel patients about tobacco behaviors. As hospital employees were trained how to refer patients to cessation services, requests grew for those same services to be available for the employees too.

"As you gain momentum and traction, employees also want to have services," says Moody-Thomas. TCI used the cessation coordinators in each hospital to make employees aware of the services offered and encourage them to take advantage of them. LSU Health Systems offers behavioral counseling classes, referrals to a quit line, and can help provide medication, if the employee is eligible. "Employees can come to the classes that are available for patients and some of the hospitals have employee-only classes," says Moody-Thomas.

Employee populations in hospitals are very diverse, but everyone at some point goes through the employee health department to get the vaccinations and tests necessary to work in the hospital setting. Moody-Thomas says the employee health department is an ideal place to promote cessation and make employees aware of available services. This captures all employees as they enter the system. Moody-Thomas also advises other hospitals to partner with groups that run the quit line in their state; that allows both organizations to gain synergy in their tobacco cessation efforts.

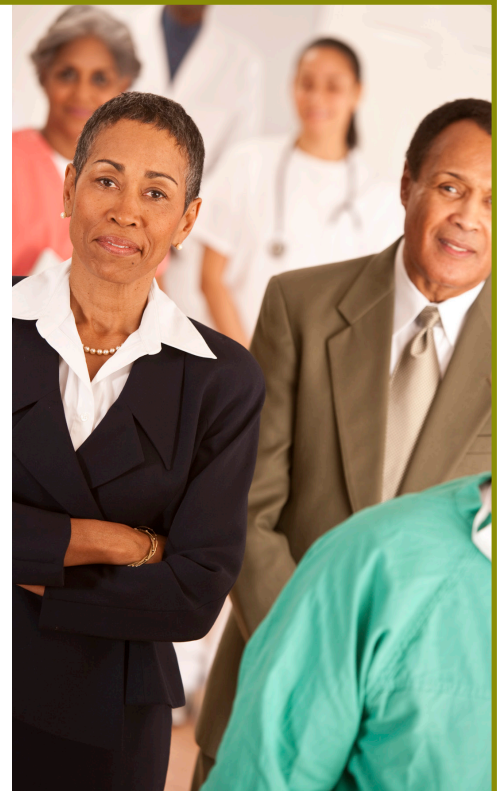
# Coming Together for the Common Good

Like many academic medical centers, the **University of Kansas Medical Center (KUMC)** has more than one administrative unit on the same campus and comprises a hospital, university, and physician practice organization. With three major organizational groups on campus, the only way for one to go smoke-free was for all of them to agree. When several hospitals in the Kansas City area came together and decided to go smoke-free in solidarity, KUMC hospital executives agreed it was the right thing to do. "The hospital led the effort for the whole medical center," says Kimber Richter, Director of the UKanQuit Hospital Treatment Program and associate professor at KUMC. Hospital leaders brought leaders from the university and physicians group on board and an agreement to go smoke-free was made.

From the very beginning, all three entities were involved in the planning process. Leaders from the human resource departments of the school, hospital, and physician group came together to brainstorm how they could help employees during this time of change. They put together an ideal program that offered 12 weeks of free nicotine replacement therapy (NRT) medication for all employees and their smoking co-habitants because it can be difficult to quit smoking when someone else in the house is still a smoker. "Co-habitants didn't have to be their partner, it could be a mom they were taking care of, or a brother if they lived with them," says Richter. Participants could choose what type of NRT they thought would work best - patch, gum, nasal spray, or inhaler.

To get the free medication, participants could choose to attend individual or group counseling. The individual program was 4 weeks long, and combined motivational interviewing with cognitive behavioral treatment. The group program, Freedom from Smoking, offered 8 weeks of group therapy. The program ran for 6 months during which time the KUMC campus successfully

went smoke-free. It was offered at a time when the main KUMC insurance carriers were not offering employees any real cessation coverage and the cessation program was a great value for employees. Now there are more options through the insurance companies, and KUMC still offers the Freedom from Smoking program to all staff. Richter says, "Most smokers want to quit and when their place of employment goes smoke-free and offers them really good help in quitting, It's a way for the medical center to show that they care about their employees' health."



## Key Considerations

- *Hospitals can be leaders by encouraging affiliated universities to adopt a smoke-free campus policy.*
- *Offering cessation services while making a campus smoke-free is one way to support employees who smoke to quit*