



## How does your facility handle residents' smoking?



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Essentially, those individuals who are competent can smoke in their rooms. We allow those who are not competent to smoke when supervised. We carefully check resident apartments for cigarettes and work with the facility staff and friends to make sure the residents don't have access to cigarettes independently. Smoking is done in the resident's room or outside the building. It is usually a nurse assistant who also smokes that has the job of smoking facilitator! People who have chronic obstructive lung disease (COPD) or heart disease can continue to smoke if they want to. Of course, those on oxygen are not allowed to smoke.

Honestly, there are few who still smoke. We work with residents individually to stop smoking or to control the number of cigarettes they smoke (eg, 1 or 2 cigarettes a day). I have several residents whom I have worked with to wean down the number and to eventually cease smoking. Generally I use behavioral interventions, not drugs.



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Smoking is not permitted in any licensed healthcare facility in New Jersey. These are the regulations for most, if not all, states. Therefore, the few people who do smoke are allowed to smoke only in designated areas that the facility so deems. If residents have dementia, they must be accompanied by one of the staff; otherwise, they cannot smoke. Even though the AL facility is the resident's home, it is still a healthcare facility and, as such, smoking is not permitted inside. As far as smoking cessation is concerned, most facilities do not offer or ask residents if they would like to quit. They only offer such help if the resident initiates the request. This way staff are not interfering with residents' rights.

## Do Smoking Cessation Programs Work With Seniors?

New research shows that 20% of seniors who used nicotine patches and a telephone hotline were able to



quit smoking for a year. Lead author Geoffrey Joyce, a senior economist with RAND, explained that the researchers examined the experiences of 7354 seniors who enrolled in smoking cessation programs in 7 states between 2002 and 2003. All study participants received a self-help kit. Participants were then divided into 4 groups:

- Group 1 received a brochure about smoking cessation.
- Group 2 received reimbursement for 4 brief counseling sessions with their doctors.
- Group 3 received counseling plus a nicotine patch or the smoking-cessation drug bupropion.
- Group 4 could use a smoking-cessation hotline and received a nicotine patch.

The rates of cessation for 1 year were 19% for group 4; 10%, group 1, 14%, group 2, and 16% group 3. The study was commissioned by the Centers for Medicare & Medicaid Services (CMS). The results show a higher success rate for those receiving a nicotine patch and

access to a hotline, but they do not determine the costs of the program.

### How Can Facilities Establish Smoking Policies?

The Center for Social Gerontology (TCSG), through a project funded by the Robert Wood Johnson Foundation, has created model policies to promote smoke-free facilities for seniors. TCSG is a nonprofit research, training, and social policy organization dedicated to promoting the individual autonomy of older persons and advancing their well-being in society.

TCSG's model policies call for totally smoke-free day care facilities. Recommendations for residential facilities, including AL facilities, are for smoke-free residential facilities to prevent secondhand smoke from causing medical problems for other residents and to reduce the risk of fires. In recognition of the 10% of AL residents who do smoke, TCSG has developed 3 separate policies for new and existing AL facilities.

### New Facilities That Wish to Establish Smoke-Free Facilities

This policy is for facilities that have not yet accepted residents and would like to adopt a smoke-free facility and campus. This policy mandates a smoke-free

facility indoors and outdoors. The policy does not contain provisions for grandfathering of existing smoking residents because, presumably, there are no existing residents to grandfather.

### Existing Facilities That Wish to Eliminate Smoking Among Future Residents

This policy is intended to be a model for a state regulation to create smoke-free AL facilities. It restricts smoking indoors to designated smoking areas for current residents who are smokers. The policy allows for grandfathering of existing residents who are smokers, with the ultimate goal of having a smoke-free facility indoors. Smoking areas are designated outdoors as well.

### Existing Facilities That Wish to Allow Smoking by Current and Future Residents

This model requires smoke-free environments inside AL facilities, but allows indoor and outdoor designated smoking areas for use by current and future residents who are smokers.

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If you wish to respond to any of the experts' comments, please send an e-mail to [experts@AssistedLivingConsult.com](mailto:experts@AssistedLivingConsult.com).



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