



Guidance on Tobacco-Free Services for OASAS Certified, Funded, and Otherwise Authorized Programs

Although New York State OASAS changed Title 14 NYCRR Part 856 Tobacco-Free Services to Tobacco Use in Adult Services, OASAS certified, funded, and otherwise authorized programs for adults can remain or return to being tobacco-free in accordance with NYS Public Health Law Section 1399-O. **It should be noted that Title 14 NYCRR Part 856 Tobacco Use in Adult Services does not apply to prevention, treatment, or recovery services for children, youth, adolescents, and/or young adults. These services must remain tobacco-free.**

All OASAS certified, funded, or otherwise authorized services for adults that choose to remain as or return to being a tobacco-free service, and all prevention, treatment, or recovery services for children, youth, adolescents, and/or young adults must create and revise written policies and procedures to be consistent at a minimum with the following criteria:

RESTRICTIONS

1. Prohibits the use of all tobacco products and nicotine delivery systems (NDS) by patients, all paid, unpaid, and contract staff, volunteers, family members, and visitors in facilities, on the facility grounds, and in vehicles owned and operated by the program.
 - a. Tobacco products include but are not limited to cigarettes, cigars, pipe tobacco, loose, roll-your-own tobacco, and smokeless tobacco.
 - i. OASAS reserves the right to revise the definition of tobacco products at any time.
 - b. Nicotine delivery systems (NDS) are any electronic or modified mechanical devices that deliver aerosolized nicotine, flavorings, and/or other chemicals by inhalation of a non-combustible liquid or gel, and any refills, cartridges, and/or any other components of such devices.
 - i. Nicotine inhalers that are Food and Drug Administration (FDA) approved medications for tobacco use disorder (TUD) are excluded from the definition of NDS if the nicotine inhaler is prescribed and monitored by a physician, physician assistant, or a nurse practitioner.
 - ii. OASAS reserves the right to revise the definition of NDS at any time.
2. Prohibits all paid, unpaid, and contract staff and volunteers from:
 - a. Purchasing tobacco products or NDS for patients, family members or visitors
 - b. Giving tobacco products or NDS to patients, family members or visitors
 - c. Using tobacco products or NDS with patients, family members or visitors
 - d. Giving matches or lighters to patients, family members or visitors

TRAINING

1. Requires clinical, non-clinical, administrative, and volunteer staff to receive evidence-based training about:

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- a. Screening and assessment for tobacco/nicotine use and TUD.
 - b. The effects of tobacco/nicotine on physical and mental health.
 - c. Counseling for reducing harm from and cessation of tobacco/nicotine use.
 - d. Medications for the treatment of TUD.
 - i. Trainings shall be described in the program's policies and procedures.
2. Requires that staff receive trainings when newly hired and annually.
 - a. Programs must maintain a log of staff trainings.

SCREENING AND ASSESSMENT

1. Includes screening questions about tobacco/nicotine use in intake forms for the program.
2. Screens for current and lifetime tobacco/nicotine use using evidence-based screening instruments as part of the initial admission assessment and every six (6) months while the patient is admitted to program.
3. Assesses tobacco/nicotine use and TUD using evidence-based assessments if the screen is positive.
4. Documents the results of screenings and assessments in the patient's record.
5. Documents tobacco/nicotine use or TUD in the diagnoses, problem lists, progress notes, and treatment plans.

TREATMENT

1. Provides a standardized group curriculum about the physical and psychological effects of tobacco and nicotine.
2. Provides evidence-based group treatments to patients that are aligned with their level of motivation to change their tobacco/nicotine use and that use evidence-based interventions for the treatment of all substance use disorders such as motivational interviewing and relapse prevention.
3. Provides FDA-approved medications for the treatment of nicotine withdrawal, nicotine craving, and TUD.
 - a. Provides written information about medications to patients.
4. Documents the patient's response to group and pharmacologic treatments for tobacco/nicotine use or TUD in the patient's record.
5. Includes discharge planning and resources for aftercare that allow the patient to continue working towards a tobacco-/nicotine-free life by maintaining the gains made in reducing or ceasing tobacco/nicotine use while in treatment.
6. Describes employee assistance programs and other programs that will be made available to staff who want to stop using tobacco products, NDS, or other nicotine-containing products.

COMMUNICATION

1. Describes how patients, all staff, volunteers, family members, and visitors will be informed of the tobacco-free policies including posted notices and providing of copies of the policy.

Recommended Trainings

The Center for Practice Innovations ([Center for Practice Innovations](#)) offers a wide array of free trainings in tobacco use disorder that satisfy the provisions of this guidance that programs may use for their staff trainings.

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OASAS Review of Tobacco-Free Policies and Procedures

OASAS certified, funded, or otherwise authorized services for adults, children, youth, adolescents, and/or young adults that remain tobacco-free are not required complete attestations verifying that they have fulfilled the requirements of this guidance. However, OASAS reserves the right to review a program's tobacco-free policies and procedures at any time to ensure they are being followed. If an OASAS service for adults decides to allow the limited tobacco-use, they must fulfill all the requirements of the Guidance on Tobacco-Limited Services and must submit the "Attestation for Tobacco-Limited Services Policies and Procedures in OASAS Certified, Funded, or Otherwise Authorized Programs for Adults" before offering tobacco-limited services. **Prevention, treatment, or recovery services for children, youth, adolescents, and/or young adults may not choose to become tobacco-limited and must remain tobacco-free.**

Questions about this guidance or how to institute tobacco-free services may be sent to AddictionMedicine@oasas.ny.gov