

## Behavioral Health Gold Star Standards of Excellence Program Guidance Document

To best support behavioral health organizations to participate in the Gold Star Standards of Excellence program, this guidance document provides more detail and examples of best practice answers to assist with completing the application. The Gold Star Standards are each followed by the sample answer. This is one example of how all 10 of the standards can be successfully met; and are not the only strategy to meet each standard; the hope is this document provides some helpful tips.

If you have additional questions or need clarification please don't hesitate to contact us at [BreatheEasy@mainehealth.org](mailto:BreatheEasy@mainehealth.org).

### 1. Tobacco-Free Policy

Standard: The behavioral health organization has a 100% tobacco-free campus policy that prohibits the smoking and use of all tobacco products including cigarettes, cigars, pipes, smokeless tobacco, snuff, chew, snus, electronic smoking devices and non-FDA approved electronic nicotine delivery systems. Smoking and tobacco use by employees, clients, visitors and contractors is prohibited at all times on the behavioral health organization property, including in parking lots, in personal vehicles parked on grounds, all organization owned or leased vehicles and at all satellite offices, buildings and any other properties owned or leased by the behavioral health organization.

Requirement: Include the written policy for the behavioral health organization.

**Sample Answer:**

Community Health & Counseling Services (CHCS) is dedicated to providing a safe, productive, and healthy smoke-free environment for all clients, employees, tenants and visitors of CHCS. On November 19, 2015, our organization adopted a 100% tobacco-free policy. The policy prohibits the "use of all tobacco products" which means cigarettes, smoking material, cigars, pipes, smokeless tobacco such as snuff and chew, and electronic cigarettes and marijuana, including for medical use. The policy prohibits the use of all tobacco products in and outside our buildings, in our parking lots, including personal vehicles.

### 2. Policy Communication

Standard: Written policies, procedures or plans detail the communication about the behavioral health organization's policy (whether or not the policy is 100% tobacco-free) to clients, employees, visitors, contractors and at all satellite offices, buildings and any other properties owned or leased by the behavioral health organization.

Requirement: Include a copy of any policy, procedures or plans that document meeting this standard.

**At least three** of the following strategies must be met in order to achieve this standard.

- Signage can be found throughout the grounds including at all entrances to the property and buildings, in parking lots, near picnic tables and other outside seating areas, other areas where people tend to gather, etc.

- New client orientation/initial appointments include education on the organization policy.
- New employee orientation includes education on the organization policy.
- All employees are required to acknowledge in writing, on an annual basis, that they have read/understand the tobacco-free policy.
- Information about the tobacco-free policy is readily available on the behavioral health organization website and/or through the HR department.
- Other: (please explain)

**Sample Answer:**

The tobacco-free policy is included in the new hire packets and supervisors review the policy with new employees. The agency tobacco-free policy is posted on the agency's intranet and is available to all employees to view.

**3. Policy Enforcement**

Standard: Written policies, procedures or plans detail policy expectations and enforcement, including how non-compliance is addressed.

Requirement: Include a copy of any policy, procedures or plans that document meeting this standard.

**At least three** of the following strategies must be met in order to achieve this standard.

- Clients receive information on the behavioral health organization's tobacco-free policy at their initial appointment and again as necessary that outlines policy compliance expectations.
- Employees are required to acknowledge in writing, on an annual basis, that they have read/understand the tobacco-free policy, including compliance expectations.
- The policy outlines who is responsible for enforcing the policy and how to handle non-compliance.
- Training on how to handle policy violations with other employees, clients, and visitors is provided for all employees.
- Progressive discipline for employee violations is written into the policy and made clear to all employees.
- Leadership walkabouts on the grounds are conducted during different times and days to approach staff, clients, visitors or contractors using tobacco to offer education and request compliance with the policy.
- Employee involvement in regular cleanup efforts to reduce tobacco-related waste on the behavioral health organization campus.
- Other: (please explain)

**Sample Answer:**

Policy includes an "FAQ" attachment that addresses such questions as, "Isn't it a person's choice to smoke or use tobacco" and "What if I see someone smoking on agency property?" Becoming a tobacco-free organization was an achievement worked on over a period of time, by a large representation of CHCS staff and included input from the adult behavioral health clients we serve. All staff and clients are empowered to promote the policy and to respectfully remind anyone they see using tobacco products of the policy and this has been effective at each of the area offices.

**4. Tobacco Advertising**

Standard: Advertising or promotion of tobacco products is not allowed on the organization's property including all satellite offices, buildings and any other properties owned or leased by the behavioral health organization. This includes publications and magazines subscribed to by the organization for

placement in waiting areas.

Requirement: Describe efforts the behavioral health organization has taken to regulate tobacco advertising. **At least one** strategy must be included to achieve this standard.

- Organization only allows magazines without tobacco advertising.
- Organization removes tobacco advertising from magazines before allowing them in waiting areas.
- Notices (posters, flyers, tent cards, signage, etc.) are placed in magazine areas stating that the organization does not support tobacco advertising.
- Maine Tobacco-Free Behavioral Health Network stickers are placed on all donated or subscribed magazines that may contain tobacco advertising.
- Other: (please explain)

**Sample Answer:**

Any and all donated materials from the community or employees is required to be screened prior to distribution to reading areas to ensure that there is no tobacco advertising contained in the publications. Our policy states that volunteers will monitor magazines and will remove advertising. Franklin County Health Network will refuse donations from the tobacco companies or their subsidiaries.

**5. Tobacco Dependence & Treatment Education**

Standard: Information about tobacco dependence, secondhand smoke, thirdhand smoke and local/state tobacco treatment resources are readily available to clients, employees and visitors. For example, educational brochures or posters are displayed in the lobby, waiting area and/or treatment rooms.

Requirement: Describe how the resources made available to clients, employees and visitors and what types of materials are provided.

**Sample Answer:**

“Quit Kits” are available to clients and staff to support their efforts to stop tobacco use. These “kits” contain resources, candy, gum, log sheets, and a ‘worry’ stone. Staff have access to all of these resources and information provided by the agency health insurance carrier.

**6. Screening for Clients for Tobacco Use and Dependence**

Standard: All clients are screened for tobacco use at initial appointments and annually thereafter. Tobacco use status is documented and clients are offered comprehensive, evidence-based treatment services.

Requirement: Describe the initial and annual tobacco screening process for new and existing clients.

**Sample Answer:**

Upon interview into this program, tobacco use is discussed as well as any nicotine replacement therapy options that they may be currently using or would consider using. Upon admission this discussion re-occurs. Each provider appointment as well as treatment meeting provides another opportunity to discuss tobacco use and dependence as well as during weekly addiction groups.

**7. Evidence-Based Tobacco Treatment Incorporated for Clients**

Standard: Clients identified as being tobacco dependent are offered comprehensive, evidence-based treatment services incorporated into treatment plan. This can include tobacco treatment counseling, clinical assessment and management for nicotine withdrawal and/or offering FDA-approved tobacco treatment medications. (*Reference: Tobacco Use and Dependence Guideline Panel. Treating Tobacco Use and Dependence: 2008 Update. US Department of Health and Human Services.*)

Requirement: Describe how these services are incorporated into your organization and how clients access them.

**Sample Answer:**

Patients will be made aware of the policy on tobacco and tobacco products. All tobacco users will be assessed and offered support. Efforts will be made to assist tobacco users cope with the no tobacco use on FCHN campus. Nicotine Replacement Therapy (NRT) materials will be offered to patients should they choose to use them during their stay. In this event, NRT materials will be prescribed and properly administered by the attending medical provider.

**8. Referral to Evidence-Based Tobacco Treatment for Clients Interested in Quitting**

Standard: Clients identified as being tobacco dependent and interested in quitting tobacco are referred to evidence-based tobacco treatment, such as the Maine QuitLink.

Requirement: Describe the client referral process to treatment services.

**Sample Answer:**

In addition to what we provide in the program, we also refer clients to the Maine Tobacco HelpLine for supportive counseling, as well as communicate with individual counselors if they have one separate from our program.

**9. Evidence-Based Tobacco Treatment Training for Employees**

Standard: The behavioral health organization supports evidence-based tobacco treatment training for employees by offering in-services on tobacco treatment, supporting staff financially to attend trainings and/or providing access to literature and resources on-site for staff. Trained staff are available to provide treatment and counseling to tobacco-dependent clients.

Requirement: List the number of employees who have been trained on evidence-based tobacco treatment counseling and education and/or the number of tobacco treatment related activities held over the past year.

**Sample Answer:**

Upon implementation of our tobacco-free workplace initiative, we had presenters on-site at all 5 of our primary locations to present Tobacco Interventions/Basic Skills and the Tobacco-Free Helper Training. Over the past year or so, we have had 5 staff attend Integrating Tobacco Treatment into the Behavioral Health setting; 1 staff member completed the Tobacco Treatment Specialist Certification. Available trainings we become aware of are forwarded to all staff via email by Human Resources.

**10. Tobacco Treatment Benefits for Employees**

Standard: Tobacco treatment services are a covered benefit in the organization health insurance package for employees and their dependents. Benefits include coverage for counseling and medication for quitting tobacco, with minimal, or no barriers to utilization (i.e. co-pays, out of pocket costs, limits, etc.).

Requirement: Describe tobacco treatment benefits provided and how they are promoted to employees.

**Sample Answer:**

If an employee/spouse/domestic partner wishes to quit tobacco use, when enrolled in an HR approved tobacco dependence treatment program; HR will reimburse 100% of the copay, or the cost of evidence-based NRT materials available OTC when used as part of the individual's quit plan.