

## Smoking Policy and Procedure Checklist

### Purpose and Intent of 483.10(c)(7)

The purpose of the facility Smoking Policy and Procedure is to instruct facility staff regarding how to honor a resident’s request to be able to smoke tobacco products or electronic cigarettes, including appropriate assessment of the resident’s ability to smoke safely. The facility will put a system in place to coordinate an accurate assessment process, documentation and decision-making to ensure that the resident’s rights are addressed and safety is preserved within the context of the requirements of participation.

To assure that the individual facility has followed all the required steps for the development and implementation of a comprehensive Smoking policy in accordance with the new Requirements of Participation (RoP), the following checklist captures specific action items. The left column represents the actual Requirements of Participation (RoP) language and the right column indicates specific strategies for successful completion and implementation of the revised RoP. When preparing updated policies and procedures, it is recommended to include actual RoP language as applicable.

### Suggested Checklist Program and Policy and Procedure

Regulation	Recommended Actions
<p><b>§483.25(d) Accidents</b> The facility must ensure that –</p> <p><b>§483.25(d)(1)</b> The resident environment remains as free of accident hazards as is possible; and</p> <p><b>§483.25(d)(2)</b> Each resident receives adequate supervision and assistance devices to prevent accidents.</p> <p><b>INTENT: 483.25(d)</b> The intent of this requirement is to ensure the facility provides an environment that is free from accident hazards over which the facility has control and provides supervision and assistive devices to each resident to prevent avoidable accidents. This includes:</p> <ul style="list-style-type: none"> <li>• Identifying hazard(s) and risk(s);</li> <li>• Evaluating and analyzing hazard(s) and risk(s);</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Review, revise and institute a Smoking Policy in accordance with the (RoP), NFPA 101, the Life Safety Code at 19.7.4 and any applicable State/Local Regulations. See regulatory requirements as well as template policy and procedure.</li> <li><input type="checkbox"/> Institute an assessment for a resident who smokes to be used for initial and ongoing assessment</li> </ul>



- Implementing interventions to reduce hazard(s) and risk(s); and
- Monitoring for effectiveness and modifying interventions when necessary.

**Resident Smoking**

Some facilities permit residents to smoke tobacco products. In these facilities, assessment of the resident’s capabilities and deficits determines whether or not supervision is required.

If the facility identifies that the resident needs assistance and supervision for smoking, the facility includes this information in the resident’s care plan, and reviews and revises the plan periodically as needed.

The facility may designate certain areas for resident smoking. The facility must ensure precautions are taken for the resident’s individual safety, as well as the safety of others in the facility. Such precautions may include smoking only in designated areas, supervising residents whose assessment and care plans indicate a need for assisted and supervised smoking, and limiting the accessibility of matches and lighters by residents who need supervision when smoking for safety reasons.

Smoking by residents when oxygen is in use is prohibited, and any smoking by others near flammable substances is also problematic. Additional measures may include informing all visitors of smoking policies and hazards.

Guidance concerning resident smoking regulations can be found in NFPA 101, the Life Safety Code at 19.7.4, Smoking, including requirements for signage, prohibiting smoking by residents classified as not responsible, and disposal of smoking materials.

- Update staff education materials for orientation, annual education, and agency staff orientation, as needed.
- Educate the interdisciplinary team about the Smoking Policy and Procedure.
- Educate residents/resident representatives about the Smoking Policy and Procedure
- Educate visitors regarding the facility Smoking Policy and Procedure
- Conduct updated training for all department leaders about supervising and monitoring for compliance with the Smoking Policy and Procedure
- Review the Smoking Policy with the Medical Director in conjunction with the Quarterly Quality Assurance Committee meeting



The below areas serve as a cross reference for facility leaders to conduct additional policy and procedure review across departments to incorporate the changes set forth in **F689 §483.25(d) Accidents. The facility must ensure that – §483.25(d)(1) The resident environment remains as free of accident hazards as is possible; and §483.25(d)(2) Each resident receives adequate supervision and assistance devices to prevent accidents. Resident Smoking.**

This listing is not all encompassing however should serve as a resource for leaders as they update their internal policies, procedures and operational processes.

Cross Reference: (additional areas for review)

- CMS Regulations
- NFPA 101, the Life Safety Code at 19.7.4
- State and Local Regulations
- Employee Orientation
- Annual Training Requirements
- Medical Director
- Incident/Accident Policy and Procedure
- Quality Assurance and Performance Improvement
- Staff Training and Education

## References

CMS State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities:

- <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Downloads/Advance-Appendix-PP-Including-Phase-2-.pdf>