

Access to Tobacco Product Cessation Supports

Reviewed Date		Number	<i>HR0506</i>
Revised Date	<i>February 10, 2016</i>	Approved Date	<i>March 21, 2007</i>

Introduction

Simcoe Muskoka District Health Unit (SMDHU) has an obligation to take a leadership role in the community to acknowledge and address the social determinants of health, and to expand tobacco-free living strategies that promote tobacco-free lifestyles. As such, SMDHU is committed to supporting its employees to quit using tobacco products by providing various supports to encourage quit attempts, and to support people during quit attempts. It is recognized that quitting tobacco use is a complex process, that people require support from many areas, and that workplace supports greatly contribute to people's success in quitting.

When attempting to quit smoking, the use of a quit smoking aide like a nicotine replacement therapy doubles the success rate of the person's attempt to quit (OMA, 1999). Best practice tells us that the use of a variety of strategies to quit smoking increases the success rate. This lends to the importance of having self-help material, opportunities for counselling, and coverage for nicotine replacement therapy available to employees.

Purpose

The purpose of this policy is to inform Simcoe Muskoka District Health Unit Board of Health members and employees of the smoking cessation supports available to them and their dependents.

Legislative Authority

N/A

Policy Definitions and Interpretation

N/A

Policy

The health unit will offer full reimbursement, as many times as required, to SMDHU employees and dependents (as currently listed in the SMDHU benefits program) who wish to use approved cessation prescription medication (Appendix A) and/or nicotine replacement therapies (Appendix B).

Procedures

All Tobacco Cessation Support expenses must be submitted to Human Resources in order to be considered for payment.

1. Staff will complete an expense report indicating if the supports are for an employee or dependent (“spouse”, dependent children under 21 or under 25 if enrolled in full time studies).
2. Attach the original receipt to your claim, sign and submit to Human Resources. The approval of the direct supervisor is not required.
3. Human resources reviews and approves the claim if appropriate.
4. Human resources forwards the approved claim to Finance for payment.
5. Reimbursement is made within three weeks of approval of the claim.

Related Policies

OP0103 Tobacco-Free Grounds

Related Forms

FI0104 Expense Report

Final Approval Signature: _____

Review/Revision History:

Revised April 25, 2012

September 2010 Policy re-numbered, previous number B6.025

Revised February 10, 2016

Appendix A

List of Approved Prescription Medication Endorsed and Authorized by the Medical Officer of Health

1. Zyban
2. Champix (or varenicline)

Appendix B

List of Approved Nicotine Replacement Therapies

1. Gum
2. Patch
3. Inhaler
4. Lozenge
5. Oral Spray