

Date Decided (dd mm yyyy)	Person Responsible:	Deadline for Action (dd/mm/yyyy)	Status Update:
03/05/2017	John Jones	01/12/2018	In progress

Question	Your Answer
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Which quality statement is this action plan for?

#5 Promoting Smoking Cessation – Adults who are admitted to an inpatient setting with a primary diagnosis of schizophrenia are offered behavioural and pharmacological interventions to alleviate nicotine-withdrawal symptoms and to help them reduce or stop smoking tobacco.

Does this statement apply to your organization? (yes/no)

Yes

What are we doing now?

Providers regularly offer pharmacological interventions to alleviate nicotine withdrawal symptoms, but do not regularly offer behavioural interventions.

What are the gaps between current practice and the quality statement?

Providers do not regularly offer behavioural interventions for patients with mental health conditions, as this is not regularly offered in the mental health inpatient unit.

What is the behavioural practice that needs to change?

One or more providers need to be assigned responsibility for providing behavioural interventions for patients with schizophrenia and be trained on how to provide these behavioural interventions.

Question	Your Answer
Whose behaviour needs to change?	Physicians, nurses.
What are the barriers/facilitators to change?	<ul style="list-style-type: none">• Barriers: We do not currently have people assigned to do this. Providers may not already have the skills to provide these behavioural interventions.• Facilitator: People with these skills/knowledge are available elsewhere in the hospital
Has the statement been prioritized for quality improvement? If so, how? (e.g. QIP)	Not yet.
What intervention/s can address the barrier and/or enhance the facilitators?	<p>Embed questions on smoking status and smoking cessation in comprehensive assessments.</p> <p>Provide training on how to provide behavioural interventions related to smoking cessation</p>