
**Pennsylvania Department of Health
Division of Tobacco Prevention & Control
Department of Corrections**

Inmate Cessation – Pilot Initiative

Smoking in Prison

- ❖ Over 6 million people are part of the U.S. criminal justice system
- ❖ Of those incarcerated
 - 70% are poor
 - 80% are substance abusers; and
 - 40% are mentally ill
- ❖ Smoking rates among U.S adult population 20.8% (CDC)
- ❖ Smoking rates among incarcerated estimated at 70%

Catalyst for Change

- ❖ Passage of CIAA provided motivation
- ❖ DOC initiative conversation regarding cessation and NRT for all inmates across the state
 - 46,000 inmates in 26 adult facilities
- ❖ Initial response to law was to make all correctional facilities tobacco free by 2010, subsequently determined would follow the tenants of the law

Working Group Convened

❖ Judy Ochs

Director, Division Tobacco Prevention and Control

3 primary contractors

1 subcontractor

1 tobacco nurse consultant

❖ Richard Ellers

Director, Bureau of Health Care Services

Dr. Nicholas Scharfe, Medical Director

Karen Belfonti, RN, Chief Quality Improvement

Working Group

- ❖ **Determined pilot was necessary**
- ❖ **Identified pilot correctional facilities**
 - SCI Pittsburgh
 - SCI Albion
 - SCI Cambridge Springs (women's facility)
- ❖ **Established two sub-groups**
 - Pilot Protocol
 - Standardized Cessation Curriculum

Cessation Curriculum Group

Alexandra Armstrong (Allegheny County)

Alice Dalla Palu (Northeast)

Kelly Kidd (Northwest)

Jerry Pilewski (Allegheny County)

Pilot Protocol Group

Cindy Thomas - Allegheny County

Alice Dalla Palu - Northeast

Kelly Kidd - Northwest

Stephanie Murtaugh - Allegheny County

Rich Ellers - DOC

Judy Ochs - TPC

Karen Belfonti - DOC

Department of Corrections Inmate Tobacco Treatment Program Outline

Session 1: Orientation

Session 2: Understanding Why I Smoke – Quitplan

Session 3: Getting Ready for Quit Day

Session 4: Quit Day Session – Managing My Quit

Session 5: Maintaining My Commitment

Session 6: Living Without Nicotine

Protocol Concept

- ❖ Top down buy-in and support at each facility would be crucial
- ❖ Education of employees, including correctional officers necessary to provide time for open discussion and to respond to resistance
- ❖ Use of SCI personnel as facilitators – adopting a train the trainer model key to sustainability
- ❖ Provision of NRT crucial to inmate success

Plan of Action

- ❖ SCI Pittsburgh Site Visit
 - Established top down support
 - Determined key contact person
 - Established interest in peer educator model
 - Agreed to protocol for inmate participation
 - Developed protocol for NRT distribution
 - Addressed safety and security issues
 - Agreed to educational presentation for SCI employees

Pittsburgh Pilot

February – September 2009

- ❖ Feb. – Initial Meeting SCI Pittsburgh
- ❖ March – Plan of Action Completed
- ❖ April– Inmate screening and selection
- ❖ April 28 – Cessation program begins
- ❖ May 6 – Employee Education during Appreciation Week
- ❖ June 3 – Site visit SCI Cambridge Springs
- ❖ June 4 – Site visit SCI Albion
- ❖ July 2 – Completed six weeks instruction with pilot groups
- ❖ July 22 – Go ahead on Pilot Phase Two – SCI Pittsburgh

Outcomes

- ❖ **Pittsburgh Pilot – two groups of 10 each**
 - 3 dropped out at own request
 - 1 was discharged for non-compliance
 - 1 paroled –was quit and relapsed just prior to parole date
 - 7 quit
 - 8 nearly quit interested in continued support

Lessons Learned

- ❖ Groups were too large – 7-8 inmates preferable
- ❖ Increase from six to eight sessions, with ongoing peer support
- ❖ Unique barriers based on prison environment
- ❖ Defined smoking areas outdoors would help both employees and inmates
- ❖ The meeting place is important
- ❖ Enthusiastic and genuine support from management is key to successful implementation.

Next Steps

- ❖ Complete peer led model at SCI Pittsburgh
- ❖ Pilot at SCI Albion and SCI Cambridge Springs
- ❖ Review effectiveness of peer led model
- ❖ Evaluate pilot
- ❖ Establish plan for roll out across state

Issues to be Addressed

- ❖ Sustainability – peer education model or staff facilitator
- ❖ Dedicated staff facilitator at each site
- ❖ Low cost supplier for patches to DOC
- ❖ Availability of highly skilled tobacco treatment professionals in all regions
- ❖ Continued smoking inside prisons
- ❖ Genuine interest at individual sites