

Smoke-Free Policy

Purpose

As part of its wider role in promoting health and wellbeing, Central and North West London NHS Trust (CNWL) has a responsibility to inform service users, staff, as well as their families, carers and, where appropriate, visitors, of the health risks of smoking and to encourage and support them to become smoke-free. No person should smoke at any time whilst they are working/on Trust premises to ensure service users, employees and visitors are kept free from the risks of smoking.

We acknowledge that some individuals will be anxious about their ability to adhere to a smoke-free environment and thus we aim to provide all available support, for the benefit of the health and well-being of all within our Trust.

The purpose of this policy is to outline CNWL's expectations regarding:

- The health and safety of all individuals within Trust premises and environments to:
 - Enhance the health of employees
 - Enhance the health of those who access the Trust's services
 - Promote a smoke-free environment
 - Encourage a smoke-free workforce
- Compliance with national legislation and guidance issued by the National Institute for Health and Clinical Excellence (NICE)
- Systems to reduce smoking rates among staff and the community, in accordance with national policy.

This policy is essential reading for the following groups of staff:

- All CNWL employees, service users and visitors, including:
 - Current and prospective staff (including volunteers)
 - Service users
 - Visitors to Trust premises

The Smoke-free Environment component of this policy includes all buildings, grounds, social venues and vehicles owned or occupied by CNWL.

Key points of the policy:


This policy describes the protocols implemented by the Trust to:

- Maintain smoke-free status on Trust premises, including grounds, in line with NICE guidance PH48.
- Train staff to enable them to provide Very Brief Advice (VBA) and face-to-face interventions to support service users to stop smoking and improve their health and well-being.
- Train clinical staff so they are able to provide medication under the Trust Written Instructions- to support service users who are required to abstain from smoking whilst in our services.
- Provide access to alternatives, such as e-cigarettes, to aid harm reduction in accordance with service user choice and clinical judgement.
- Provide support and advice to staff who smoke.

Smoke-Free Policy

Policy Lead:	Sue Murphy, Sector Lead, Tobacco Dependence Treatment Lead, Stop Smoking Services
Ratifying Committee / Group:	Clinical Effectiveness and Policies Group
Status of Policy:	APPROVED
Policy Reference:	TW/00166/24-29a

Signed:



Maria O'Brien, Chief Nurse

Signed:



Dr Con Kelly, Chief Medical Officer

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1.0 Introduction

The purpose of the Smoke Free Policy is to outline the Trust's expectations in relation to enhancing the health and safety of the people who are cared for by the Trust's services and the people who provide the care, by promoting a smoke-free, healthy environment on Trust premises, in line with evidence-based guidance and legislation. It is widely recognised that nicotine replacement therapy or non-nicotine medication can help to combat the physical side of smoking addiction, while cognitive behavioural therapy helps change the way people behave and think about smoking. We aim to deliver treatment and support to people who are under our care who wish to stop smoking permanently or temporarily abstain from smoking whilst on Trust buildings or grounds. We will ensure that there is a robust training programme in place to enable staff to develop the skills required to deliver the treatment required.

The policy is underpinned by the Smoke-free legislation (Health Act, 2006), NICE Guidelines for Smoking: acute, maternity and mental health services (NICE, 2013a) and Smoking: harm reduction, (NICE, 2013b) (NICE, NG209), and the NHS five year forward view (NHS England 2014). It is line with the ambitions set out in The NHS Long Term Plan (2019), NHS England's Vision for London (2019) and supports the UK government's vision to a smoke-free England by 2030 (Roadmap to a Smoke free 2030-Action on Smoking in Health (2020).

2.0 Background

- Tobacco smoking remains the leading cause of preventable illness and premature death in England. The tobacco epidemic is one of the biggest public health threats the world has ever faced, killing more than 8 million people a year around the world. More than 7 million of those deaths are the result of direct tobacco use while around 1.2 million are the result of non-smokers being exposed to second-hand smoke
- Smoking rates have fallen significantly in recent years, but smoking still accounts for more years of life lost than any other modifiable risk factor. Around 7 million people in England still smoke. Smokers see their GP over a third more often than non-smokers, and smoking is linked to nearly half a million hospital admissions each year. Every year around 78,000 people in the UK die from smoking, with many more living with debilitating smoking-related illnesses. Smoking increases the risk of developing more than 50 serious health conditions. Some may be fatal, and others can cause irreversible long-term damage to health. Smoking causes around 7 out of every 10 cases of lung cancer (70%). It also causes cancer in many other parts of the body, including the: mouth, throat, voice box (larynx). Smoking damages the heart and your blood circulation, increasing the risk of developing conditions such as: coronary heart disease, heart attack and stroke. Current estimates are that nearly a quarter of women in the UK smoke during pregnancy, which can lead to several adverse outcomes including still-birth and low birth weight.
- Smoking is the single largest driver of health inequalities in England and is far more common among people with lower incomes. The more disadvantaged someone is, the more likely they are to smoke and to suffer from smoking-related disease and premature death.
- Young people with parents who smoke are more exposed to smoking behaviour, more likely to try smoking and, once addicted, they find it harder to stop. Smoking rates are also higher among people with a mental health condition, people in contact with the criminal justice system, looked-after children, and LGBT people. These high rates of smoking exacerbate the health inequality already experienced in these groups who will in addition often prioritise purchasing cigarettes and tobacco over other needs such as food and utility bills.

- Smokers with enduring mental health conditions experience more severe mental health symptoms, require higher doses of psychotropic medication and spend more time in hospital compared to people with a mental illness who do not smoke
- We know that people who stop smoking greatly reduce their risk of developing preventable disease and dying prematurely. Stopping smoking is the one of the most **important** actions people can take to improve mental and physical health and enhance quality of life. This policy aims to help people to work towards a smoke free life and outlines how CNWL will provide the support to enable this to become a reality.

3.0 Responsibilities

Individual / group	Responsibility
Operations Board	Oversee implementation of the policy by review of an annual update report from the Quality team
Medical Director & Executive Director of Nursing & Quality	Approve and ratify policy
Clinical Effectiveness & Policy Group	Approve policy
Physical Health Strategy Group	Disseminate information to divisions and staff via local smoke-free leads and review progress.
All front-line clinical staff	Complete Level 2 smoking cessation training & follow the Smoking Cessation Care Pathway in practice (see Appendix 3)
All staff	Complete Level 1 smoking cessation training & offer Very Brief Advice (VBA) to smokers

4.0 Smoke-Free Environment

- All CNWL sites are Smoke-free.
- Smoking is not permitted inside and around Trust affiliated buildings and their grounds, vehicles and offices, including in any buildings leased by CNWL
- Staff, service users and visitors may not smoke in external areas on any site owned by the Trust, or controlled by them under a lease arrangement; on-site includes boundary fences, gardens and entrances to sites.
- Should staff wish to smoke off-site during work time, it will only be permissible during authorised breaks, and they should not be identifiable as staff of CNWL by their uniforms or ID cards.
- As CNWL staff support service users both in their own homes and in the community, staff should minimise their own risk to second-hand tobacco smoke in these settings (**see Appendix 1 for guidance**).

5.0 Promoting a Smoke-Free Environment

The Trust will provide support to smokers (both service users and staff) to assist them in maintaining a smoke-free environment. All staff must inform service users, visitors and colleagues who are found to be smoking on-site that CNWL is smoke-free and request that they go off-site to smoke. All CNWL sites must have local implementation policies detailing their plans to achieve and sustain this, including any exceptions related to specific sites. (Staff responsibilities in relation to this policy are outlined in Appendix 3)

- The Trust will provide support to smokers (both service users and staff) to assist them in maintaining a smoke-free environment.
- All staff should inform service users, visitors and colleagues who are found to be smoking on-site that CNWL is smoke-free and request that they go off-site to smoke.
- Staff with responsibility for service user care should inform service users and their families/carers of CNWL 's Smoke-free Policy upon admission (and if possible in advance of admissions) to the Trust's services and to discuss any concerns they may have, providing details of the support provided.
- Cigarettes should never be used as behavioural tools (e.g. to build rapport with service users and/or de-escalate or manage critical incidents).
- Lighters and matches are not permitted and should not be brought onto Trust premises. Search policies should be utilised accordingly to prevent covert smoking and reduce fire risk.
- CNWL is committed to all sites achieving full smoke-free status, including confiscation of tobacco on admission, and until discharge. All CNWL sites will have local implementation policies detailing their plans to achieve this, including any exceptions related to specific sites.
- E-cigarettes are considered to be a helpful alternative harm reduction option for service users who do not find NRT/other smoking cessation medications helpful. In the in-patient environment, consideration should be given to the areas where their use is appropriate, and they should be of the disposable type. In-patients will be able to purchase disposable, non-re-chargeable E-cigarettes from vending machines on site or bring in their own devices, provided they are compliant with Trust policy on E-cigarettes. Vaping will only be permitted in a single occupied room -or in the grounds outside, and not in communal areas.
- **In relation to the Trust's Mental Health Services** - Section 17 leave and smoking: Escorted leave periods should not be provided for the purposes of smoking. Healthcare staff should **not** be required to facilitate smoking in the course of their duties. (See Appendix 3 – Operational Guidance on maintaining a smoke-free environment on inpatient Units).
- Section 17 leave for therapeutic groups: group activities must be smoke-free wherever they take place.(See Appendix 4)
- The Smoke-free Policy must be clearly displayed and available to all.
- Smoke-free signage must always be clearly visible in the workplace.

6.0 Hazard Identification

In order to best manage workplace health and safety, smoking is an identified hazard on the Corporate *Risk Register*. Any breach witnessed, or any negative effects experienced, should be recorded as an incident, to ensure that this is investigated.

7.0 Staff Non-compliance

Any instance of a member of staff found to be in breach of the policy section on Smoke-free Environments should initially be addressed by their manager. Repeated breaches will be dealt with in accordance CNWL's Staff Code of Conduct. Any employee who consistently breaches the policy (e.g. smoking in a smoke free area or taking unauthorised breaks) may be subject to disciplinary action.

8.0 Complaints Procedure

Individuals who believe, on reasonable grounds, that there has been a failure to comply with the purpose of the policy, should forward their complaint, in writing, to the appropriate manager to be dealt with as stated in the Complaints Policy.

9.0 Smoke-Free Systems

CNWL is committed to the development and/or improvement of systems around becoming smoke-free (supporting service users and staff who smoke or are exposed to secondhand smoke in the home).

This includes systems for:

- Promoting a Smoke-free environment
- Identifying service users who smoke or are exposed to secondhand smoke in the home
- Documentation of smoking status, service user intention and brief intervention
- Facilitating effective smoking cessation interventions with service users who smoke
- Effective referral processes for further cessation support
- **Supply and provision of Smoke-free resources** -all service users will have access to free NRT as required/appropriate Smokers admitted to Trust in-patient services will be offered a range of Nicotine Replacement Therapies, and/or other smoking cessation medications where appropriate, to address symptoms of nicotine withdrawal during admission. These must be offered to smokers wherever practicable within 30 minutes of admission. E-cigarettes are also permitted for use within many adult Trust in-patient services in non-communal indoor areas where this is the service user's preference (see Appendix 5 and 6 for details on which types of device may be used). E-cigarettes are available to purchase from on-site vending machines in many Trust inpatient units and may be offered free for a limited period for emergency admissions where there is financial hardship.

10.0 Smoke-free Education and Training -Under review

Smoking Cessation training sits within the "CNWL Mandatory Training" list of subjects. CNWL Mandatory training ensures that certain staff groups regularly receive the relevant level of training suited to their role/s and responsibilities.

Smoking Cessation Training will be certificated to ensure all staff complete the Level 1 Smoking Cessation E-learning module. (Clinicians may complete it as part of Making Every Contact Count (MECC) training).

Front line clinicians from the following groups:

- i. Registered nurses in both MH & Community services and medical staff.
 - ii. Registered nurses in HTT
 - iii. Physical Health Care teams
 - iv. Staff with physical health lead roles within CMHTs/CMHHs should complete Level 2 Smoking Cessation Practitioner training delivered internally.
- Existing staff members should review the revised Smoke-free Policy. New staff should read it and complete the Level 1 e-module as part of induction process.

Staff are encouraged to access the National Centre for Smoking Cessation Training (NCSCT) who also provide a comprehensive level 2 online training module in addition to 'Very brief Advice' level one and a range of specialist modules e.g. Mental Health, Pregnancy and Homelessness.

11.0 Support for Staff

- All CNWL staff will actively support people to stop or reduce smoking by:
 - Identifying service users and staff who smoke or are exposed to secondhand smoke in the home
 - Providing very brief advice (VBA) to those who smoke
 - Offering cessation support either themselves or by referral to trained Level 2 advisors or local & National Stop Smoking Services
 - Providing Trust smoke-free information leaflet, available from Communications Team:
communications.cnwl@nhs.net

Staff who smoke will also be encouraged and supported to quit smoking and will be allowed reasonable time out of work to attend smoking cessation advice/support sessions. Free expert help is available from your local stop smoking service.

Visit www.nhs.uk/better-health/quit-smoking/ for more information and to find a stop smoking service near you, or call the free National Smoke-free Helpline on 0300 123 1044.

12.0 Monitoring compliance and effectiveness

Local implementation of the policy will be led by the identified local smoke-free leads who will provide feedback to the Physical Health Strategy Group. The group meets bi-monthly and will also review smoking related incidents. An annual update report is reviewed at the Operations Board.

L&D will report on training attendance, feeding back to the Strategy Group.

13.0 Policy Review Process

- Ongoing implementation and review of the Smoke-free Policy will be the responsibility of the Physical Health Strategy Group.
- The policy will be reviewed on an annual basis and in accordance with national legislation.

14.0 Reference Documents

ASH Action on Smoking and Health April 2021, Change in mental health after smoking cessation: systematic review and meta-analysis. Taylor G, McNeill A, Girling A, Farley A, Lindson-Hawley N, Aveyard P. BMJ. 2014;348: g1151.

Choosing Health, Public Health White Paper, Department of Health 2004

<https://navigator.health.org.uk/theme/choosing-health-making-healthy-choices-easier-white-paper>
[Incentives for smoking cessation - Notley, C - 2019 | Cochrane Library](#)

NHS Long Term Plan

<https://www.longtermplan.nhs.uk/online-version/chapter-2-more-nhs-action-on-prevention-and-health-inequalities/smoking/>

<https://www.nhs.uk/common-health-questions/lifestyle/what-are-the-health-risks-of-smoking/>

NICE Guidance:

<https://www.nice.org.uk/guidance/ph48>

<https://www.nice.org.uk/guidance/ng92https://pathways.nice.org.uk/pathways/smoking>

Nice Guidance Updated 2021

[Overview | Tobacco: preventing uptake, promoting quitting and treating dependence | Guidance | NICE,2021d](#) [Recommendations on treating tobacco dependence in pregnant women | Tobacco: preventing uptake, promoting quitting and treating dependence | Guidance | NICE](#)

Office for National Statistics (2018) Adult smoking habits in the UK: 2017. Accessible from:

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandlifeexpectancies/bulletins/adultsmokinghabitsingreatbritain/2017>

Tobacco Fact Sheet, World Health Organisation, (WHO) July 2021.

Additional free [e-learning for healthcare professionals](#): VBA+, Stop smoking medications, Vaping guidance. Free stop smoking practitioner training (Level 2) is provided by [NC SCT](#). NC SCT. Smoking cessation and smokefree policies: Good practice for mental health services. 2018. URL: https://www.ncsct.co.uk/publication_mental_health_briefing.php

15.0 CNWL Associated Documents:

- Observation and Therapeutic Engagement Policy
- Clinical Risk Assessment, Safety and Crisis Planning Policy

- Search Policy
- Prevention and Management of Violence and Aggression
- Incidents and Serious Incidents Policy
- Disciplinary Policy
- Complaints Policy
- Incidents Policy
- Guidelines on Nicotine Replacement Therapy and Bupropion/Varenicline
- Service User's Health and Wellbeing/Care Plan

For further information, please consult the Smoking page on Trustnet.

This Policy is part of a range of policies that together comprise the CNWL NHS Foundation Trust Health and Safety Policy.