

SMOKE FREE POLICY

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| Department / Service: | Human Resources |
| Author/Owner: | Denise Harnin |
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| Approved by: | Denise Harnin On behalf of Joint Negotiating and Consultative Committee |
| Date of Approval: | April 2017 |
| Review Date: | 7 th December 2020 |
| This is the most current document and should be used until a revised version is in place | |
| Target Organisation(s) | Worcestershire Acute Hospitals NHS Trust |
| Target Departments | All wards and departments |
| Target staff categories | All staff categories, visitors and patients |

Policy Overview:

The purpose of this policy is to actively promote and maintain the health of the community by promoting and supporting health and wellbeing of all employees, patients and visitors to the Trust, and to ensure compliance with the Health Act 2006 and the associated Smoke-Free (Premises and Enforcement) Regulations.

Key amendments to this Document:

| Date | Amendment | By: |
|-----------|---|-----------------------------|
| Feb 14 | This document replaces previous document named Smoking Policy – same reference code used. | |
| Feb 14 | Re write of policy to include total smoking ban for staff, volunteers and contractors on hospital sites and grounds with a short term aim to be totally smoke free by January 2015. Inclusion of November 2013 NICE Guidance on smoking. | Julia Crannage |
| May 14 | Inclusion of e-vapour cigarettes into section 7-12 | Julia Crannage |
| March 16 | Document extended for 12 months as per TMC paper approved on 22 nd July 2015 | |
| Feb 17 | Policy amended to reflect total ban for all patients and visitors to premises | Debbie Drew |
| June 2019 | Document extended for 12 months whilst review process takes place | Rachel Morris/Tina Ricketts |
| June | Document extended for 6 months during COVID-19 period | |

2020

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1. Introduction

Smoking is a major cause of illness and early death and the government is taking active measures to decrease smoking behaviour by reducing the number of public areas in which smoking is permitted. From October 2015 this was extended to cover smoking in private cars with children present.

As one of the main providers of health services in Worcestershire, the Trust is committed to eliminating smoking on Trust premises and to assisting employees, contractors, patients and visitors to achieve greater health through smoking cessation.

The Smoke Free Provisions of the Health Act 2006 became enforceable from 1st July 2007 and has made virtually all enclosed public places and workplaces in England smoke free. A smoke free country ensures a healthier environment, so everyone can socialise and work free from passive smoke inhalation. **It is against the law to smoke within 15m of a public building.**

The associated Smoke-Free (Premises and Enforcement) Regulations provide a clear definition of what is meant by an enclosed space and detail the designated enforcement authorities.

Section 2(2) of the Health and Safety at Work Act 1974 also places a duty on employers to:

“...provide and maintain a safe working environment which is, so far as is reasonably practical, safe without risks to health and adequate as regards facilities and arrangements for their welfare at work”

Worcestershire Acute Hospitals NHS Trust (WAHT), in line with the Health Act 2006, has a responsibility for the maintenance, and where possible, improvement of the health of its patients and employees.

2. General Principles

NHS England state that smoking is the leading most preventable cause of death and disease in the UK and is responsible for over 460,000 admissions into hospital in England each year. There is much evidence to support a move to a smoke-free environment.

This Policy recognises that second-hand smoke adversely affects health and in promoting and maintaining the health of the community, the Trust has a duty to extend its philosophy to the work environment which it manages. The Trust aims to support and promote the general well-being of all its employees and to eliminate any unnecessary illness caused by smoking by providing a safe and healthy environment for employees and people who use or visit its hospitals.

The aim of this policy is to:

- Ensure that everyone can work in or visit the Trust in a smoke free environment
- Support patients and employees who wish to stop smoking
- Encourage employees to become involved in health promotion initiatives
- Set a good example to the public and enhance the image of the Trust

- Demonstrate adherence to the national No Smoking Statement and Smoke Free Regulations 2007.
- Remove the risks associated with passive smoking which government research has shown to be dangerous to health.
- Protect all people on Trust premises from the danger to their health of exposure to second hand smoke
- Set an example to other employers
- Demonstrate the Trust's leadership role in health promotion by arranging for Trust buildings, properties, grounds and vehicles to be smoke-free
- To actively promote and support health and wellbeing

The Trust is committed to becoming completely smoke-free and to creating a culture where smoking is no longer considered the norm. This will be achieved by ensuring there is a programme of support in place to provide people with the medication, behavioural support, and counselling they need, and by creating an environment where they are not seeing and being exposed to the drivers for smoking.

Having smoke-free hospital grounds as well as buildings as this sends out a strong message from the organisation about the established dangers of smoking and second hand- smoke. People smoking at the entrance to NHS buildings give a very poor impression of the Trust and this also means that those entering and leaving the buildings have to pass through tobacco smoke. People in the buildings who work or are treated near to open windows are also exposed to other people's smoke.

3. Scope of this Policy

This policy applies to all employees of the Trust and those who are working on behalf of the Trust (such as contractors, agency staff and volunteers), patients, visitors and the general public, and all other site users.

4. Policy Statement

With effect from 17th June 2015 smoking (including the use of e-cigarettes, vapour cigarettes or other substances) was not permitted in any part of the Trust's buildings, grounds, vehicles or car parks owned by the Trust at any time by any person regardless of their status or business with the organisation.

5. Responsibility and Duties

Overall responsibility for this Policy rests with the Trust Board. Operational responsibilities are delegated as follows:

5.1 Executive Directors

The lead Executive Director for this Policy will be the Director of Human Resources and OD. In addition, all Executive Directors will be responsible for ensuring that:

- All employees are informed of the terms of the policy and the procedures that apply to them
- The policy is implemented and operated effectively within the sphere of their control

- Managerial action is fair, equitable and reasonable in all circumstance(s) and is monitored effectively

5.2 Managers and Supervisory Staff

Managers and Supervisory Staff carry responsibility for effectively and fairly implementing and operating this policy within their teams. This includes ensuring that all staff are treated fairly in terms of paid and unpaid breaks. Paid smoking breaks are not permitted.

5.3 Employees

Employees will be responsible for meeting the requirements of this policy. Where staff, agency staff, or contractors breach this policy by smoking whilst they are on duty, on trust premises, or in uniform/identifiable with a name or ID badge they may face disciplinary action.

Employees will also be expected (where they feel safe to do so) to encourage compliance with the policy from everyone working and using the Trust's services and to promote health and wellbeing. Where they do not feel safe to challenge someone to stop smoking employees should notify security.

5.4 Human Resources Directorate

The Human Resources Directorate is a source of advice and guidance on the interpretation and application of the policy, and will be responsible for delivering training to staff (in the form of Conflict Resolution Training).

6. Equality Requirements

An Equality Impact Assessment has been undertaken in accordance with Trust policy and attached as Supporting Document 2.

7. Policy Detail

7.1 Restrictions on Smoking – Employees, contractors (including individuals working on site as part of a training contract) and volunteers

Employees, contractors, agency staff, and volunteers are not permitted to smoke whilst on duty anywhere within the hospital buildings or grounds. This includes in lease vehicles or private cars parked with the Hospital grounds. See section 7.9 Smoking in Vehicles.

Smoking is not permitted during working hours or when recognisable as an employee, contractor or volunteer at any time (for example, when in uniform, or wearing identification, or engaged in hospital business).

Employees are entitled to scheduled **unpaid** breaks as agreed with their manager; local policy and in line with their contract of employment. The Trust does not recognise smoking breaks.

Employees, contractors, agency staff, and volunteers are reminded to be responsible and considerate to local residents when smoking off site. They must ensure they are off duty and that any form of Trust identification (including uniform) is completely covered up. This is

to ensure they are not identified as Trust staff and also to keep their uniforms clean and free from smoke odour.

7.2 Restrictions on Smoking – Patients

Patients are not permitted to smoke in Trust premises, in Trust vehicles or on Trust grounds.

Before a planned or likely admission, the Trust will work with patients and will include the management of smoking on admission in the patient care plan.

Employees will not be permitted to assist or accompany patients who wish to smoke outside of the hospital grounds and will receive the support of senior colleagues and security staff (where available) if patients or visitors place them under pressure to violate the Trust's Policy.

7.3 Restrictions on Smoking - Visitors

Visitors are not permitted to smoke on Trust premises, in Trust vehicles or anywhere on Trust grounds.

7.4 Communication to employees and volunteers

Job advertisements, job descriptions and interviews will include reference to the Smoke Free Policy and will indicate that adherence to it will form part of the contract of employment. Employees and volunteers will be told about the ban on smoking in their place of work on appointment, and given means of accessing smoking cessation support.

All induction, Conflict Resolution training, and fire lectures will refer to this policy.

Employees will be supported and encouraged to challenge any breaches of the smoking policy they witness by patients and visitors and should they encounter any negative responses, this should be reported to their line manager and/or security. Employees who witness other employees smoking anywhere within the hospital site should again report this to their line manager/security.

7.5 Communication to Patients

Details of the policy will be included in patient information booklets and admission literature before their appointment, procedure or hospital stay. The information will include:

- The short and long-term health benefits of stopping smoking at any time including the significant positive effects of stopping smoking in the 8 weeks running up to surgery.
- The risks of second hand smoke
- That all buildings and grounds are smoke-free
- The types of support available to help them stop, or temporarily abstain from smoking before, during and after an admission or appointment.

Patients admitted as an emergency will be informed of the Smoke Free Policy verbally when/if appropriate.

7.6 Communication to Visitors

During contact with partners, parents, and other family members, and carers of people using the Trust's services, staff will:

- Provide clear information and advice about the risks of smoking and second-hand smoke
- Provide advice not to smoke near the patient, pregnant women, mother and child; this includes not smoking in the house or private vehicle

No Smoking signs will be in place at entrances and across the hospital sites.

7.7 Communication to Contractors/individuals working on site on training contracts

Contractors are not permitted to smoke on Trust sites and should receive written guidance on the details and expected adherence to the policy within any tendering process and/or procurement of services.

7.8 Care in Private Homes/Residential Premises

The Trust will work with service users and carers to protect staff from tobacco smoke when they are visiting the homes of people using hospital services.

7.9 Smoking in vehicles

Smoking is not permitted in any vehicle used to transport the public or used by more than one employee in carrying out work duties.

This includes:

- All Trust owned vehicles
- Vehicles leased through arrangements with the Trust when being used for Trust business
- Privately owned vehicles when carrying one or more passengers travelling on Trust business
- Privately owned vehicles when parked on Trust premises (including on site car parks).

7.10 Support for Staff who want to give up smoking

Advice and support will also be available for employees wishing to stop smoking from the Occupational Health Service.

7.11 Sales of Tobacco Products

The sale of tobacco products in any of the hospitals sites is prohibited.

7.12 E-cigarettes and e-vapour cigarettes

The efficacy of e-cigarettes and e-vapour cigarettes are still not clear and they are currently not licenced by NICE.

With effect from 6 July 2016) Public Health England (PHE) published its [new framework advice for businesses and employers](#) on the use of e-cigarettes. There are now 2.8 million e-

cigarette users in the UK and there is a need for appropriate policies in public places and workplaces.

The framework advises organisations to consider 5 principles covering the following considerations:

1. Make clear the distinction between vaping and smoking.
2. Ensure policies are informed by the evidence on health risks to bystanders.
3. Identify and manage risks of uptake by children and young people.
4. Support smokers to stop smoking and stay smokefree.
5. Support compliance with smokefree law and policies.

Smoking is the country's number one killer, causing nearly 78,000 deaths each year in England. While the long-term effect of e-cigarettes is unknown, and they are not completely risk-free, the current evidence indicates that they are significantly less harmful than smoking tobacco and are helping smokers to quit.

PHE is committed to carefully monitoring the evidence on e-cigarettes as it emerges and to communicating it so that policymakers and the public have the information they need to make informed decisions. The PHE report on "Electronic Cigarettes" May 2014 states:

"Despite some manufacturers' claims that electronic cigarettes are harmless there is also evidence that electronic cigarettes contain toxic substances, including small amounts of formaldehyde and acetaldehyde, which are carcinogenic to humans and that in some cases vapour contains traces of carcinogenic nitrosamines, and some toxic metals such as cadmium, nickel and lead. Although levels of these substances are much lower than those in conventional cigarettes, regular exposure over many years is likely to present some degree of health hazard, though the magnitude of this effect is difficult to estimate. "

In line with the Trust's principles to set a good example to the public, enhance the image of the Trust and to set an example to other employers, e-cigarettes and e-vapour cigarettes are not permitted to be used anywhere on the hospital site and grounds.

7.13 Training for staff to undertake their responsibilities within this policy

All front line employees have a responsibility to actively encourage patients, visitors and carers to stop smoking and all employees are expected to support this policy as part of the Trust's responsibility for promoting better health for all. As a result, staff will receive training as part of the Conflict Resolution training, and Trust Induction , to ensure they are confident and competent to approach and deal with anyone who is in breach of this policy.

All frontline staff (where appropriate) will receive relevant training including a range of interventions and practices to deliver advice around stopping smoking and referral to intensive support including knowledge about the hospital stop smoking services and how to refer people to them. They will be trained to talk to people in a sensitive manner about the risks of smoking and the benefits of stopping.

7.14 Non- compliance/Enforcement

The Trust will aim to facilitate compliance with and resolve immediately any breaches of the Smoke Free Policy.

All employees are responsible for supporting the policy and are required to deal with any observed or reported breaches by reporting to their line manager or to security. It is important to note that the primary emphasis should be placed on prevention of such situations arising. Employees should not however enter into arguments with patients, visitors and the general public.

In the event of a breach of the policy by a patient, visitor or member of the public, they should be asked to extinguish all smoking material and be informed of the Trust's policy.

In situations where individuals or groups refuse to cease smoking on any of the hospital sites or grounds, employees should summon the Trust's security service (where available) or their line manager and if appropriate this will involve asking individuals to leave the site.

Any complaint relating to this policy from or on behalf of patients should be dealt with under the Trust's complaints procedure.

Any employee, despite having received the appropriate communication, training and support, who refuses to observe the Policy, will be liable to disciplinary action in accordance with the Trust's Disciplinary Policy and Procedure.

7.15 Signage

The Trust is required by law to display appropriate 'No Smoking Signs' in prominent positions at or near each entrance to its premises so that people entering the premises can see them.

No Smoking signage will also be displayed in each compartment of work vehicles and in other locations around the grounds

8. Financial risk assessment

The financial risk assessment associated with No Smoking Environment Policy is attached as Supporting Document 3. There are no direct financial risks associated with this Policy.

9. Consultation

This policy has been developed in consultation with staff side and management representatives.

10. Approval Process

The policy has been developed by a policy working group (a sub-group of the Joint Negotiating and Consultative Committee) and has been subject to consultation with staff representatives. The policy has been approved by the Joint Negotiating and Consultative Committee and the Patient Experience Forum

11. Implementation Arrangements

The policy was implemented for staff on 17th June 2014 with a launch event and 3 month lead in time to allow for staff support and training. A further launch event for the total ban

took place on 17th June 2015 and a three month countdown period was in operation through the intranet and press releases to communicate with patients and visitors.

12. Dissemination

The policy will be placed in the Trust's HR Document library on the Intranet and will be publicised through Trust Daily Update, policy update briefings for managers and notified to the Trust Board by HR through the Workforce Advisory Group.

13. Training and awareness

Awareness of this Policy will be raised throughout the Trust. It will be included in all Induction training, conflict resolution training and Fire Training

14. Monitoring and compliance

The following indicators will be used to monitor the effectiveness of the policy:

- Awareness of staff to the requirements of the policy
- Numbers of staff accessing Stop Smoking Support
- Numbers of breaches of policy and any subsequent action taken under the Trust's Disciplinary Policy and Procedure.
- Numbers of complaints received

15. Development of the Policy

This policy will be reviewed after 2 years, or earlier in the light of any legislative changes, developments in best employment practice, to ensure its continuing relevance and effectiveness.

16. References:

| | |
|--|--|
| NICE Guidelines (2013) Tobacco: harm reduction approaches to smoking | |
| Smoke Free Provisions of the Health Act 2006 | |
| ASH Briefing (2010) Electronic cigarettes | |
| PHE report on "Electronic Cigarettes" (May 2014) | |

Supporting Document 1 - Equality Impact Assessment Tool

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

| | | Yes/No | Comments |
|-----------|---|----------|--|
| 1. | Does the policy/guidance affect one group less or more favourably than another on the basis of: | | |
| | • Race | No | |
| | • Ethnic origin (including gypsies and travellers) | No | |
| | • Nationality | No | |
| | • Gender | No | |
| | • Culture | No | |
| | • Religion or belief | No | |
| | • Sexual orientation including lesbian, gay and bisexual people | No | |
| | • Age | Possible | Smoking is more prevalent in older generations; e-cigarettes and vapes in younger generations. |
| | • Disability | No | |
| | • Gender reassignment | No | |
| 2. | Is there any evidence that some groups are affected differently? | No | |
| 3. | If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable? | n/a | |
| 4. | Is the impact of the policy/guidance likely to be negative? | Yes | Likely to be negative responses from staff who are smokers |
| 5. | If so can the impact be avoided? | Yes | 3 month lead in time from approval of original ban. |
| 6. | What alternatives are there to achieving the policy/guidance without the impact? | n/a | |
| 7. | Can we reduce the impact by taking different action? | n/a | |

If you have identified a potential discriminatory impact on this key document, please refer it to the Head of Human Resources – Workforce Transformation, together with any suggestions as to the action required to avoid/reduce this impact.

For advice in respect of answering the above questions, please contact the Head of Human Resources – Workforce Transformation.

Supporting Document 2 – Financial Impact Assessment

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

| | Title of document: | Yes/No |
|----|--|--|
| 1. | Does the implementation of this document require any additional Capital resources | Yes for signage (via Trust Board) |
| 2. | Does the implementation of this document require additional revenue | Possibly – for increase to Smoking Cessation Advice – although this will also generate income. |
| 3. | Does the implementation of this document require additional manpower | Yes (Via Trust Board) |
| 4. | Does the implementation of this document release any manpower costs through a change in practice | No |
| 5. | Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programmes or allocated training times for staff | No – will be incorporated in existing training. |
| | Other comments: Resources required for removing of smoking shelters, signage, training for staff, additional staff to support the Stop Smoking Service | |

If the response to any of the above is yes, please complete a business case and which is signed by your Finance Manager and Directorate Manager for consideration by the Accountable Director before progressing to the relevant committee for approval.