

# Policy: S5

# Smoke Free Policy

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Ratified by:	Trust Management Team
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Title of Author:	Clinical Services Manager/Specialist & Forensic
Title of responsible Director	Executive Director of Nursing and Patient Experience
Governance Committee	Clinical Effectiveness & Compliance
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NHSLA relevant?	Yes
Disclosure Status: <b>B</b>	<b>B</b> Can be disclosed to patients and the public

<b>EIA / Sustainability</b>	 G:\Trust Policies and Procedures\TMT\Mar
<b>Implementation Plan</b>	 G:\Trust Policies and Procedures\Smoke Fr
<b>Monitoring Plan</b>	 G:\Trust Policies and Procedures\Smoke Fr
<b>Other Related Procedure or Documents: S5p - Staff Smoking Operational Policy Broadmoor</b>	

### **Equality & Diversity statement**

The Trust strives to ensure its policies are accessible, appropriate and inclusive for all. Therefore all policies will be required to undergo an Equality Impact Assessment and will only be approved once this process has been completed

### **Sustainable Development Statement**

The Trust aims to ensure its policies consider and minimise the sustainable development impacts of its activities. All policies are therefore required to undergo a Sustainable Development Impact Assessment to ensure that the financial, environmental and social implications have been considered. Policies will only be approved once this process has been completed

# S5 Smoke Free Policy

## Version Control Sheet

Version	Date	Title of Author	Status	Comment
S5/01	August 2006	Smoking Review Committee	New Policy	
S5/02	January 2007	Smoking Review Committee		
S5/03	June 2008	Service Manager	Under consultation	Consultation ends 13 <sup>th</sup> June 2008
S5/04	23 June 2008	Medical Director	Revised Policy Trust-Wide Implementation	Revised Policy approved by Clinical Standards and Strategy Group 20-06-2008
S5/05	23 June 2008	Medical Director	Revised Policy Trust-Wide Implementation	
S5/06	25 June 2008	Medical Director	Re-issue of revised Policy	This version now includes the modified appendices
S5/07	22 August 2008	Medical Director	Re-issue of revised Policy	This version reflects agreement made at CSSG on 15.08.08 regarding exemption notification
S5/08	15 <sup>th</sup> Jan 2009	Medical Director	Under Review	Underwent Trust wide consultation in Oct 08 ending 5 <sup>th</sup> Dec 08. Policy review date extended to April 2009
S5/09	15 <sup>th</sup> Mar 2009	Medical Director	Under Review	Policy review date extended to October 2009
S5/10	12 <sup>th</sup> August 2009	Assistant Director of Primary Care Developments	Policy revised	Policy revised following Board agreement for the development of designated smoking areas.
S5/11	15 <sup>TH</sup> Sept 2009	Assistant Director of Primary Care Developments	Policy revised	Further revision following presentation to the CSSG (21.08.09) to operational plans for designated smoking areas. For operational sign off at ODG in September 2009
S5/12	1 <sup>st</sup> May 2010	Assistant Director of Primary Care Developments	Policy Revised issued	23 <sup>rd</sup> Jan 2010 Policy amended to reflect consultation comments. Approved at 1 <sup>st</sup> March Policy Review Group.
S5/13	27 <sup>th</sup> Oct 2011	Clinical Services Manager	Policy revised	Underwent Trust wide consultation and updated to reflect changes in Law and designated smoking areas for CSU.

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## 1. INTRODUCTION

- 1.1 The Public Health White Paper, Choosing Health, made a commitment to a smoke free NHS by the end of 2006. Section 2(2) of the Health and Safety at Work Act 1974 places a duty on employers to protect the health, safety and welfare of their employees and to:

*'...provide and maintain a safe working environment that is, so far as is reasonably practicable, safe, without risks to health and adequate as regards facilities and arrangements for their welfare at work.'*

- 1.2 The Health Act 2006 prohibits smoking in all “*enclosed, or substantially enclosed, areas*” and nearly all workplaces from July 2007. An exemption for psychiatric hospitals ended on 1st July 2008.
- 1.3 Several European Union directives relating to health and safety in the workplace have come into force since 1 January 1993. These include the Management of Health and Safety at Work Regulations 1999 which, under General Principles of Prevention, include:
- Avoiding risks
  - Combating risks at source
  - Replacing the dangerous by the non-dangerous or the less dangerous
  - Giving collective protective measures priority over individual protective measures.
- 1.4 Following the 2010 Public Health White Paper “Healthy Lives, Healthy People” the Department of Health have produced a tobacco control plan for England (March 2011). This plan lays out the government’s key actions to reduce tobacco use over the next five years. These include:
- Helping tobacco users to quit.
  - Reducing exposure to second hand smoke
  - Stopping the promotion of tobacco
  - Effective regulation of tobacco products
  - Effective communications for tobacco control
- 1.5 Second-hand smoke (breathing other people’s tobacco smoke) has now been shown to cause lung cancer and heart disease in non-smokers, as well as many other illnesses and minor conditions. West London Mental Health Trust acknowledges that breathing other people’s smoke is both a public health hazard and a welfare issue. Therefore, the following policy has been adopted concerning smoking.

## **2. SCOPE**

2.1 The aims of this Policy are to:

- Protect and improve the physical and mental health of staff, service users, visitors and workers from other organisations that use WLMHT sites.
- Protect both smokers and non-smokers from the danger to their health of exposure to second hand smoke.
- Contribute to the Trust's commitment to health improvement.
- Encourage an environment conducive to giving up smoking, which provides that staff and service users are fully supported.
- Contribute to the overall management of fire risk in Trust premises.
- Ensure the Trust meets all its legal obligations.

## **3. DEFINITIONS**

- 3.1 The Trust acknowledges the challenges posed by a smoke free policy and works closely with partner local authorities, primary care trusts and other organisations to provide a smoke free environment.
- 3.2 Smoking is not permitted or facilitated in any Trust, buildings, gardens or grounds except in clearly designated areas.
- 3.3 Designated smoking areas are clearly identified on the Ealing, The Cassel, Hounslow and Hammersmith and Fulham sites only.
- 3.4 Smoking is only permitted to in-patient service users within designated gardens or smoking shelters. Smoking shelters and gardens will only be available at designated times during the day. Smoking outside the shelters or gardens or times is NOT to be permitted.
- 3.5 This policy applies to all staff, visitors, contractors and employees of other organisations who enter premises that West London Mental Health Trust owns, leases or rents for any purpose.
- 3.6 Where the policy relates to 'staff' this includes locums, bank, agency, trainees, volunteers and seconded staff on either temporary or permanent contracts.
- 3.7 The policy applies to all vehicles owned or leased by the Trust. It also applies to any vehicles used by members of staff in the course of their employment to transport staff, service users or members of the public
- 3.8 Staff are not allowed to smoke at any time whilst on duty.
- 3.9 Staff should not smoke whilst on duty on any third party sites, e.g. home visits, care homes or prisons where smoking is permitted.
- 3.10 Staff have the right to ask service users not to smoke whilst they are on home visits to minimise the effects of passive smoking.
- 3.11 Staff who rent their home (for example a room or flat) from the Trust may smoke in the area of their private quarters but not in any areas shared with neighbours for example kitchens or corridors that link flats.

## 4. DUTIES

### 4.1 Chief Executive

The Chief Executive is responsible for ensuring that the Trust has policies in place and complies with its legal and regulatory obligations.

### 4.2 Accountable Director

The accountable director is responsible for the development of relevant policies and to ensure they comply with NHSLA standards and criteria where applicable. They must also contain all the relevant details and processes as per P3. They are also responsible for Trustwide implementation and compliance with the policy.

### 4.3 Managers

Managers are responsible for ensuring policies are communicated to their teams / staff. They are responsible for ensuring staff attend relevant training and adhere to the policy detail. They are also responsible for ensuring policies applicable to their services are implemented.

### 4.4 Policy Author

Policy Author is responsible for the development or review of a policy as well as ensuring the implementation and monitoring is communicated effectively throughout the Trust via CSU / Directorate leads and that monitoring arrangements are robust.

### 4.5 Local Policy Leads

Local policy leads are responsible for ensuring policies are communicated and implemented within their CSU / Directorate as well as co-ordinating and systematically filing monitoring reports. Areas of poor performance should be raised at the CSU / Directorate SMT meetings.

### 4.6 Service users

4.6.1 Smoking is prohibited in all Trust wards, buildings and grounds except within the designated gardens/smoking shelter within the designated times.

4.6.2 The Trust recognises that there should be some flexibility in exceptional circumstances. These circumstances will only arise in two situations.

(a) Significant psychiatric deterioration

In circumstances where a service user's clinical team decide that a clinical presentation indicates a significant deterioration in mental state, and where no garden or shelter is accessible, the exceptional provision of a smoking facility may be of benefit. A facility may, at the discretion of clinical staff then be made available.

(b) Terminal illness

When a patient has been diagnosed as being in the terminal phase of an illness the clinical team, at its discretion, may allow a patient to smoke.

- 4.6.3 The decision to apply an exemption on an individual case basis must be agreed with the CSU Clinical Director.
- 4.6.4 The Trust recognises the importance for service users to reduce or stop smoking. The circumstances of some service users may mean they would prefer to continue to smoke however others may welcome the opportunity to reduce or stop smoking. Each service user will be regularly assessed and reviewed to ascertain their smoking status and offered support and advice to reduce or stop. Multidisciplinary teams will record service user's smoking status. The information, advice and treatment given to inpatient service users who have been smokers will be incorporated into their care plans. Staff will be permitted to purchase cigarettes on behalf of detained patients only.
- 4.6.5 Staff will need to be sensitive when approaching the topic of smoking cessation especially when a service user has just been admitted to hospital or is experiencing a significant crisis. All service users who have smoked should be offered advice and support at regular intervals.
- 4.6.6 Service users admitted to hospital will be asked not to bring smoking-related material with them. Inpatients with smoking-related items will be asked to hand them in to staff. In the Cassel Hospital, inpatients will be asked to sign a contract undertaking not to smoke in Trust buildings or grounds.
- 4.6.7 When a service user who has smoked is discharged from the inpatient service, the discharge summary will reflect the smoking care plan and be clearly communicated to the new service and the service user's GP to ensure continuity of care.
- 4.6.8 Smoking may lower blood levels of certain medications used in psychiatry. Smoking cessation may therefore result in increased medication levels. Information regarding the management of psychotropic medicines and smoking cessation is available on the Trust intranet. The Trust pharmacist can also be contacted for specific advice on interactions between tobacco and medicines. This also appears in the smoke free page on the Exchange.
- 4.6.9 Guidance for staff regarding smoking cessation and the prescribing of Nicotine replacement therapy has been developed and appears in the smoke free page on the Exchange.
- 4.6.10 In implementing the policy, staff should focus on promoting health, and must consider the principles of necessary and proportional response in managing implementation and responding to conflict situations that may arise. Any conflict occurring must be recorded in line with the Incident reporting policy.
- 4.6.11 Care plan templates for management of smoking cessation, of smoking cessation whilst taking Clozapine are included in the smoke free page on the Exchange
- 4.6.12 Care plan templates for management when applying exemptions are included in the smoke free pages on the Exchange.

## 4.7 Staff

- 4.7.1 The Trust recognises that smoking is an addiction and adherence to a smoke free policy will be a challenge for some members of staff. Staff are offered smoking cessation advice and the support of occupational health.
- 4.7.2 If staff need to smoke during their working hours they can only leave the Trust buildings or grounds to do so. Smoking is only allowed during break times when not on duty. Therefore the following applies;
- Under the European Working Time Directive, where staff work for longer than six hours they are entitled to a break of a minimum of 20 minutes. All staff are encouraged to take a break.
  - Staff are not entitled to any additional smoking breaks over and above their entitlement under the European Working Time Directive.
  - In most health and social care workplaces, breaks are taken in a manner consistent with maintaining minimum staff levels and managing risk. Managers therefore need to plan effectively for their staff who leave the premises on breaks for any reason.
  - Staff who smoke off site during duty breaks should ensure that their clothes, hair and breath do not smell of tobacco smoke when they return to the site.
- 4.7.3 Staff are expected to promote a smoke-free environment and healthy living. Staff should avoid condoning or advocating the use of tobacco smoking.
- 4.7.4 Staff are discouraged from providing or purchasing tobacco unless the Service User is detained. Staff must not use tobacco as a reward for service users.
- 4.7.5 If staff breach the policy then in the first instance managers should discuss the issue with them and ensure they fully understand the smoke free policy. If staff continue to breach the policy then action through the disciplinary process may be instigated.
- 4.7.6 No smoking signs are clearly displayed in appropriate places inside and outside of the Trust's premises. All members of staff are obliged to support the implementation of the Smoke Free Policy.

## 4.8 Visitors and contractors

- 4.8.1 The staff member inviting visitors and contractors on to Trust premises is responsible for making them aware of the Trust's smoke free policy.
- 4.8.2 If staff observe a visitor smoking on Trust premises, they should make the visitor aware of the Trust's smoke free policy and ask them to stop smoking. If the visitor does not comply with the policy they should be asked to leave the premises. If visitors refuse to comply with this advice site security should be informed.
- 4.8.3 If staff observe a contractor smoking on Trust premises, they should make the contractor aware of the Trust's smoke free policy and ask them to stop smoking. If the contractor does not comply they should report the contractor to the estates and facilities department.

- 4.8.4 Staff safety must always be paramount. Under no circumstances should any member of staff be encouraged to enforce the policy if they believe they would be at risk in doing so.

## **5. MANAGING THE IMPLEMENTATION**

- 5.1.1. Ward managers and community managers will be responsible for maintaining a smoke free environment.
- 5.1.2 Service Directors will be responsible for managing the implementation of smoke free policy for units for which they are responsible.
- 5.1.3 Each CSU will provide Operational Guidance detailing how the revised smoke-free policy and the management of the designated smoking areas will be managed.
- 5.1.4 The individual CSU Operational Guidance will be found on the smoke-free page of the Exchange. The Trustwide Physical Healthcare Group will be responsible for maintaining the smoke-free page on the Exchange.

## **6. REFERENCES**

This policy should be read in conjunction with the following:

- Choosing Health, 2006, Department of Health
- Health and Safety at Work Act, 1974, HMSO
- Managing Health and Safety at Work Regulations, 1999, HMSO
- Healthy Lives Health People, 2010, Department of Health
- The Tobacco Control Plan for England, March 2011, Department of Health
- European Working Time Directive, 2006, HMSO
- The Smoke Free page, West London Mental Health Exchange

## **7. GLOSSARY OF TERMS/ACRONYMS**

NHS	National Health Service
CSU	Clinical Service Unit