

# The Newcastle upon Tyne hospitals NHS foundation trust

## Smoke Free Trust Policy

Effective: August 2010

Review: December 2011

### 1. Introduction

The Public Health White Paper, Choosing Health (2004), makes a clear commitment to a 'Smokefree' NHS.

Section 2(2) of the Health and Safety at Work Act 1974 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'.*

1.1 Since January 1993 a number of EU directives have come into force and which 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 dangerous by the non dangerous or the less dangerous.
- Giving collective protective measures priority over individual protective measures.

1.2 Second-hand smoke – 'breathing other people's tobacco smoke' – has been shown to cause lung cancer and heart disease in non-smokers, as well as many other illnesses and minor conditions.

1.3 The Trust acknowledges that breathing other people's smoke is both a public health hazard and welfare issue.

The aim of the policy is to:

- Protect and improve the health of staff.
- Protect and improve the health of patients, visitors and contractors.
- Protect both smokers and non-smokers from the danger to their health of exposure to smoke.
- Set an example to other employers and workforces, particularly in health related locations.

### 2. Scope

2.1 This policy applies to all staff, patients, visitors, contractors and other persons who attend the Trust's premises and grounds whether on personal or Trust business, and applies across all sites/premises and land, whether owned or leased and, occupied by the Trust.

2.2 Smoking is not permitted in any buildings or grounds of the Trust.

### 3. Guidance for Application to the Policy

#### 3.1 Staff

***Staff must not smoke in buildings or in the grounds owned, leased or occupied by the Trust even if they are not on duty.***

***Staff must not smoke outside of the premises in uniform or displaying ID.***

***Staff choosing to smoke must do so in their own time.***

Staff should be aware that in failing to comply with this policy they may be subject to disciplinary action according to Trust disciplinary policies and procedures.

Staff who find it difficult to adjust to the policy should be offered support and the following actions may be taken to assist them:

- In the first instance Departmental/Sister/Charge Nurses should meet with the member of staff to assess any difficulties and how these may be overcome.
- If required the Manager may refer the individual to the following services;
  - Occupational Health
  - Newcastle Stop Smoking Service

Alternatively, the individual member of staff may wish to seek support from their local GP.

#### 3.2 Stop Smoking Services

Staff wishing to quit smoking can be referred to or self-refer to either the Occupational Health Team or the Newcastle Stop Smoking Service, telephone numbers are available through Switchboard. Alternatively, they may choose to consult their own GP.

#### 3.3 Patients

Information leaflets are available to all wards and departments and are sent to patients prior to admission to advise them of the Trust 'No Smoking' policy.

Staff should ensure that within their Nursing and Medical assessment of all patients that they ascertain and record the smoking status of the patient and provide brief advice to the patient accordingly in regard to access to Stop Smoking service. Patients should be encouraged to accept referral to this Service or to self-refer to the Service as appropriate.

Should a member of staff encounter a patient who wishes to smoke then the following actions must be taken:

Staff should ensure that the patient is aware of Trust policy. If the patient appears to be unaware of the policy they should be provided them with a 'Smoke free' leaflet or card, informing them of the policy.

Patients who choose to smoke must be advised that they may only do so off the premises.

Patients who choose to leave the ward for the purpose of smoking should be advised they do so at their own risk and should be recorded in their clinical notes.

Patients should not to be escorted by a member of staff, except on the very rare occasions when they have a treatable, serious condition, and are at risk of absconding, which would put their own or others 'health at risk, and who insist on smoking.

Where a relative/visitor is present they may wish to accompany the patient.

a) Patient known to staff

Where staff encounter patients, known to them, who are smoking in the ward/hospital environment, the patient should be informed of the Trust policy, advised to extinguish the smoking material and asked not to do so in future.

If the patient fails to comply with this policy and the information given to them, then the patient should be asked to handover smoking materials to staff to ensure the health, safety and wellbeing of other patients, visitors and staff. If these items are handed over by the patient for safe keeping, they should be returned on discharge.

In the event that this action is not successful and the patient refuses to refrain from smoking or relinquish smoking materials, then the patient's Consultant should be contacted, if known, and asked to approach the patient and to address the issue with the patient.

Patient's failure to comply with requests to cease smoking **may** result/necessitate in the patient being discharged from the Hospital. In situations where the patient becomes verbally abusive or violent as a reaction to the request, reference should be made to the Policy for the Exclusion from Treatment for Violent or Abusive Patients in regard to further management.

b) Patients/Visitors that are NOT known to staff

Patients /Visitors that are NOT known to staff and their compliance with this policy present a particular challenge in enforcing this policy.

All staff have a responsibility to support the implementation of his policy. However, this should not bring them into conflict in attempting to inform

individuals of this. Staff are responsible for ensuring that they make every effort to ensure the policy is enforced.

- c) How should staff address these issues with an individual who is smoking?
- Staff should assess the situation and not put themselves at risk.
  - On approaching the individual who is smoking the member of staff should introduce themselves.

The member of staff should ask whether the individual is aware of the Trust policy and remind them politely that the Trust is 'Smoke free'.

The individual should be advised where they may smoke, off site, and should be directed appropriately.

If they refuse to stop smoking, they should be asked that in future they ensure they smoke off Trust premises. The member of staff should then withdraw.

A member of the Security Team, who can also provide information on the Trust policy, should be contacted to enable them to address the issue with the individual.

Staff should be aware that Trust property is 'private property' and therefore visitors do not have the right to smoke on these premises.

Staff who are subjected to 'verbal' or 'physical' abuse, resulting from attempts to enforce this policy should report such incidents immediately to either their line manager or Portering/Security Supervisor immediately, completing the appropriate Trust Incident Reporting documentation.

**Staff are reminded that the Trust operates a 'Zero Tolerance' toward violence and aggression and all incidents should be reported.**

### 3.4 Helping Patients to Quit

All patients invited for elective admission/out-patient appointment are sent a copy of the Information for Patients booklet, which includes details of the Trust's Smokefree Policy and local Stop Smoking Services. At the time of admission to hospital all patients will be asked, as part of the admission process, about their smoking habits. All smokers should be advised of the associated health risks and asked about their intention to stop. They should all be given an information card detailing contacts for local 'stop smoking services' and encouraged to contact them. This should be recorded in the patient's assessment documentation.

Patients who, on the advice of a Consultant or following discussion with Nursing staff or at pre-assessment/admission, indicate that they wish to quit should be encouraged to do so and given the necessary support. This decision should be recorded in the patient's Clinical Record and Medical Staff are advised accordingly.

Advice and information can be provided using the Trust resources, leaflets etc. Information can be made available in Braille or other languages if required.

NRT (Nicotine Replacement Therapy) can be obtained by prescription on Consultant/Prescribers orders. Should the patient wish to avail themselves of this treatment, then staff should inform the appropriate Prescriber to ensure clinical assessment and prescription is undertaken according to the Trust protocol for the administration of Nicotine replacement Therapy. .

Newcastle Stop Smoking Service can be contacted directly on 0191 229 2910, alternatively patients can contact the local service on 0300 123 9290 or the National Helpline can be contacted on 0800 169 0169.

### 3.5 Monitoring and Audit

Monitoring of compliance with the requirements of the policy will be reviewed annually in the following areas:

- Patient Notes Review.
- Data collection on smokers challenged by Security staff by site.
- Number of Contacts/Referrals to Smoking Cessation Team.

Policy author: Operational Services Manager.

**THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST**  
**IMPACT ASSESSMENT – SCREENING FORM A**

This form must be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

Policy Title:	<b>Smoke Free Trust Policy</b>	Policy Author:	Mr Paul Brewis, Operational Services Manager
		Yes/No?	You must provide evidence to support your response:
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	• Race	No	
	• Ethnic origins (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	No	
	• Disability – learning difficulties, physical disability, sensory impairment and mental health problems.	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?	No	
4(a).	Is the impact of the policy/guidance likely to be negative? <i>(If "yes", please answer sections 4(b) to 4(d)).</i>	No	
4(b).	If so can the impact be avoided?	No	
4(c).	What alternatives are there to achieving the policy/guidance without the impact?	No	
4(d).	Can we reduce the impact by taking different action?	No	

<b>Comments:</b>	<b>Action Plan due (or Not Applicable):</b>

Name and Designation of Person responsible for completion of this form: Mr Paul Brewis, Operational Services Manager

Date: 01 February 2011

Names & Designations of those involved in the impact assessment screening process: Trust No Smoking Policy Development Working Group

(If any reader of this procedural document identifies a potential discriminatory impact that has not been identified on this form, please refer to the Policy Author identified above, together with any suggestions for the actions required to avoid/reduce this impact.)