

Control of Smoking Policy (Patients and Visitors)

Date	Version
May 2016	V3 Final

Purpose

To discharge the Trust's responsibilities under the Health Act 2006, and associated NICE Guidelines and Quality Standards.

Who should read this document?

All Departmental Managers, who must ensure that staff within their teams are aware of this Policy, and communicate this effectively to the patients and visitors who use the Hospital.

Key Messages

This Policy is issued under the authority of the Chief Executive and will apply to all patients and visitors who use the Hospital. Trust staff should communicate the key messages within this Policy document to staff, patients and visitors. The key messages are:

- Patients and Visitors are not permitted to smoke within Trust Buildings. This is a requirement of the Health Act 2006, and there are no exemptions in this Trust.
- Patients and Visitors will be actively discouraged from smoking within the Trust Grounds. This will be subject to enforcement close to the entrances of the buildings.
- Patients should be informed that the Trust operates SMOKEFREE buildings and sites in any correspondence from the Trust.
- Patients should be asked about their tobacco use status at initial outpatient appointments, and they should be referred to the Smoking Cessation service, where appropriate. This should form part of the clinical management plan for this patient group.
- On admission, all patients should have their tobacco use status recorded using the admissions protocol. Patients should be offered nicotine replacement therapy medications in accordance with NICE guidelines, and this should be provided free of charge.
- Patients receiving care in their own homes should refrain from smoking during the home visit. They should ensure that others in the household also refrain from smoking. This should be explained to patients ahead of the visit. If smoking continues, then an alternative care plan or venue should be considered to ensure the safety and wellbeing of staff.
- Based on considerations of etiquette and appearance, the use of e-cigarettes is not permitted in Trust buildings, and is strongly discouraged within Trust grounds. This will be reviewed as the regulatory environment changes, or when new advice is available from Government.

Accountabilities

Production	Facilities Assurance Manager
Review and approval	Director of Planning and Site Services
Ratification	Director of Planning and Site Services
Dissemination	Facilities Assurance Manager
Compliance	Director of Planning and Site Services

Links to other policies and procedures

- Fire Safety and Arson Prevention Policy
- Access Policy for Planned Care Services
- Simple Discharge Standard Operating Procedure
- End of Life Care in Hospital Policy
- Health and Safety Policy
- Management of substance use in pregnancy and postnatal period Policy
- Records Management Code of Practice Part 2
- Restraining Therapies Appendix G

Version History

V1	Initial draft developed by the SMOKEFREE Task Group
V2	Draft following comments from Trust Board
V3	Final version for release
Last Approval	Due for Review
May 2016	May 2021

The Trust is committed to creating a fully inclusive and accessible service. By making equality and diversity an integral part of the business, it will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

An electronic version of this document is available on Trust Documents. Larger text, Braille and Audio versions can be made available upon request.

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1 Introduction

In common with many NHS Trusts, smoking presents a major challenge. The provision of a SMOKEFREE environment is essential for Plymouth Hospitals NHS Trust to comply with the Health Act 2006, under which NHS Providers have a duty to discourage Smoking; to provide support for those who wish to quit; and to protect those who use or deliver hospital services from the harmful effects of second hand smoke.

Plymouth Hospitals NHS Trust is committed to protecting and improving the health and well-being of staff, patients and visitors by providing SMOKEFREE areas. This is fundamental to the Trust's desire to play an exemplary health promotion role.

Coming into hospital presents many patients with an ideal opportunity to stop smoking. Therefore Plymouth Hospitals NHS Trust is committed to supporting patients to quit through providing access to Nicotine Replacement Therapies, and Smoking Cessation support. To aid this, all patients need to be informed of the Trusts approach to providing a SMOKEFREE environment; have their smoking status recorded; and have appropriate support offered and delivered as part of their care plans.

2 Purpose, including legal or regulatory background

The Trust wishes to achieve a SMOKEFREE site for our patients, visitors and staff, and therefore must control smoking by Patients and Visitors.

This Policy sets out the approach that the Trust will take in Controlling Smoking by Patients and Visitors whilst they are on the Trust's premises. This Policy also describes the support that the Trust will provide to Patients who wish to quit Smoking, or to manage their nicotine withdrawal symptoms whilst receiving medical treatment.

In terms of the regulatory background, the Trust is required to:

- Implement the Chief Medical Officer's recommendations on smoking in NHS organisations including the provisions within the 2006 Health Act.
- Adhere to NICE guidance and quality standards, including:
 - Smoking: brief interventions and referrals (PH1);
 - Smoking: harm reduction (QS92);
 - Smoking: stopping in pregnancy and after childbirth (PH26);
 - Stop Smoking Services (PH10);
 - Smoking: reducing and preventing tobacco use (QS82);
 - Smoking: supporting people to stop (QS43);
 - Smoking in Acute, Maternity and Mental Health Services (PH48).
- Adhere to SMOKEFREE legislation.
- Comply with the Health and Safety at Work Act (1974) in relation to protecting employees from the exposure to tobacco smoke, and providing a safe place of work.

3 Definitions

The Trust

Plymouth Hospitals NHS Trust (PHNT), inclusive of all peripheral buildings and grounds.

SMOKEFREE zone

All premises and grounds owned or leased by The Trust as detailed on the site plans in Appendix 4.

Electronic cigarette (e-cigarette)

All generations of devices containing a nicotine-based liquid used to stimulate the experience of smoking tobacco; including both vapour and vapourless models.

Patients

Those who come into contact with the National Health Service for the purpose of diagnosis, investigation, or treatment. This includes those being treated in their own homes.

Visitors

Those who come to a Plymouth Hospitals NHS Trust site or building for any purpose. This excludes Staff or Contractors.

Nicotine Replacement Therapy

Any intervention that may be prescribed to reduce the craving for Smoking – either as a temporary aide, or as part of a commitment to quit Smoking.

Smoking Cessation Advice

Advice or support offered through the Livewell Plymouth Smoking Cessation service.

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Duties

Chief Executive: is responsible for providing strong leadership on smoking cessation support and ensuring the maintenance of a SMOKEFREE environment for Patients and Visitors.

Director of Planning and Site Services: is responsible for ensuring arrangements and procedures are in place for the maintenance of the SMOKEFREE environment.

Medical Director: is responsible for ensuring that Smoking Status is recorded in Medical records and smoking cessation advice and support is made available to Patients as part of their care plans.

Executive Directors are responsible for ensuring:

- appropriate support systems are in place to signpost patients to NHS Stop Smoking Services;
- training is available for staff to support the implementation of this policy;
- nicotine replacement therapy is available to patients at the point of need;
- the trading or promoting of tobacco products in any form is not allowed on the premises;
- a SMOKEFREE environment is provided and promoted for the wellbeing of patients, visitors and staff;
- there is visible leadership through approaching patients and visitors found to be smoking in the SMOKEFREE zones;
- the monitoring the implementation of this policy and ensuring that adequate resources are in place to support its delivery.

Senior Leaders, including Matrons, Heads of Departments, Managers and Team Leaders are responsible for ensuring:

- that staff have suitable training to support the implementation of this policy;
- that all staff are aware of the NHS Stop Smoking Service that is available for Patients;

- that systems are in place for recording the Smoking status of all Patients, and that Smoking Cessation advice and support, including Nicotine Replacement Therapies, are readily available for staff to provide to Patients;
- a SMOKEFREE environment by:
 - approaching Patients and Visitors found to be smoking on Plymouth Hospitals NHS Trust premises and within the controlled zone;
 - supporting staff in feeling comfortable with approaching smokers within the controlled zone.

All Clinical Staff are responsible for ensuring:

- that every opportunity is used to identify a Patient's Smoking Status, and where appropriate, provide information and advice on how to quit Smoking;
- that patients are informed of the Control of Smoking (Patients and Visitors) Policy, before and during a visit to the Trust;
- that they are aware of the appropriate referral mechanisms available to patients.

Livewell Stop Smoking Service is responsible for:

- providing advice and support to patients regarding stopping smoking or temporary abstinence from smoking;
- helping patients to access stop smoking medications for temporary abstinence from smoking or whilst quitting smoking;
- supporting PHNT with the development and updating of this Control of Smoking policy;
- assisting Trust staff by offering training and advice about supporting patients to give up smoking.

Indigo is responsible for:

- providing a regular proactive patrol of the SMOKEFREE controlled zone;
- challenging and requesting smokers to refrain from smoking in the SMOKEFREE controlled zone and encouraging them to move to an area outside of this zone;
- Assisting patients and visitors who wish to report incidents of smoking on Trust properties.

All PHNT Staff are responsible for supporting a SMOKEFREE environment by:

- where comfortable, approaching patients and visitors found to be smoking on Plymouth Hospitals NHS Trust premises within the SMOKEFREE controlled zone, and reminding them of this policy;
- assisting patients and visitors who express concern with regard to smoking on Trust premises;
- setting an example, by adhering to the Control of Smoking (Staff) Policy.

Patients attending a Plymouth Hospitals NHS Trust Site

- All written communication sent by The Trust to Patients should include information of the Trust's approach to providing a SMOKEFREE environment. This is an important component of the Trust's duty to raise awareness of the dangers of Smoking.
- All patients will be asked their tobacco use status at their initial appointment and referred to the Stop Smoking Service where appropriate. Encouragement and support to cease smoking should form part of the clinical management plan for all smokers. The Smoking status must be clearly recorded in the Hospital Notes.
- On admission, all patients will have their tobacco use status recorded using the admissions protocol, and be referred to the Stop Smoking Service if required. Patients who wish to quit smoking, or temporarily abstain from smoking will be offered stop smoking medication in accordance with NICE guidelines. The care plans for these Patients must include a plan for temporary abstinence, or for long time cessation.
- Patients who smoke, and who do not wish to take advantage of the support and services that are offered, must be reminded that smoking, including the use of e-cigarettes, is not permitted in any Trust building or in the SMOKEFREE Zones within the grounds. If these patients still wish to Smoke they should be informed that they are only permitted to do so in the areas outside of the SMOKEFREE controlled Zones on the plans in Appendix 4.
- Clinical staff must not accompany patients out of the Trust Buildings for the purpose of Smoking unless there are exceptional reasons. These reasons, together with the appropriate authorisation should clearly be recorded in the Notes.
- Where Patients are discovered Smoking within any of the Trust's buildings, this should be dealt with immediately. These Patients must be approached and asked to extinguish the cigarette or stop using the e-cigarette with immediate effect. If this approach is unsuccessful, then:
 - This must be escalated to the relevant Line Manager or Senior Staff member on duty.
 - If necessary, the Security Team should be called via the Helpdesk on extension 32000.
 - If there is immediate danger, for instance Smoking is taking place within an oxygen rich environment, then the cigarette may be removed from the Patient without consent. Security should be notified using the emergency number of 3333.
 - In order to comply with the Fire Safety and Arson Prevention Policy, a DATIX report should be completed for all incidents of Smoking inside Buildings.
- The Trust has a statutory obligation to provide a safe environment for its patients, staff and visitors, as well as a moral duty to take all reasonable steps to protect the health of staff. Where there are persistent breaches of the Control of Smoking Policy (Patients and Visitors) they may be referred under the Tackling Violence and Aggression policy. This may result in a 'Yellow Card' formal warning being issued, which sets out strict guidelines that must be followed in order to continue to be allowed to attend Trust premises. If this is unsuccessful and further serious breaches occur, this may result in a 'Red Card' which results in exclusion from Trust premises, except for emergency care.

Patients receiving care or home visits

- Where staff provide services in the homes of patients, they should be able to do so in a safe, SMOKEFREE environment. All staff visiting or treating patients in their own homes are entitled to the same level of protection from second hand smoke as those working on PHNT premises.

- Patients and other occupants in the home should be asked to refrain from smoking during the visit and it should be explained that this is Trust Policy. This information should be made available in appointment letters or in advance by telephone where possible.
- If the client/patient or other occupants do not respect the Control of Smoking Policy, the line manager should be informed. An alternative care plan or venue may be arranged where this is reasonably practicable and the safety and well-being of the patient is not compromised.

Visitors

- Visitors should be asked to comply with this Policy and informed of the SMOKEFREE controlled zone. Every opportunity should be taken to raise awareness of the Trust's approach to providing a SMOKEFREE environment.
- Visitors who are causing a nuisance through Smoking in close proximity to the hospital building should be asked to move. If this is unsuccessful, then Security should be contacted through the Helpdesk on 32000.
- Breaches of Smoking by Visitors inside building should be dealt with immediately, and in the same way as for Patients. Continual serious breaches of the Control of Smoking Policy may result in visitors being excluded from Trust premises through the 'Yellow Card' system.

Electronic Cigarettes

- Based on considerations of etiquette and appearance, and not of health and safety, Plymouth NHS Hospitals Trust prohibits the use of these products inside all Trust buildings and within the SMOKEFREE zone shown in Appendix 4;
- The use of e-cigarettes will be reviewed by the Trust should they become a prescribed medicine; when further evidence concerning their use emerges; or in light of Government guidance or legislation.

6 Overall Responsibility for the Document

Overall responsibility for this document rests with the Director of Planning and Site Services.

7 Consultation and Ratification

The design and process of review and revision of this policy will comply with The Development and Management of Trust Wide Documents.

The review period for this document is set as default of five years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be approved by the Trust Board and ratified by the Director of Planning and Site Services.

Non-significant amendments to this document may be made, under delegated authority from the Director of Planning and Site Services, by the nominated author. These must be ratified by the Director of Planning and Site Services and should be reported, retrospectively, to the approving group or committee.

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades directly affected by the proposed changes

8 Dissemination and Implementation

Following approval and ratification, this policy will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process, currently the 'Vital Signs' electronic newsletter.

Document control arrangements will be in accordance with The Development and Management of Trust Wide Documents.

The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with the named Executive Director and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

9 Monitoring Compliance and Effectiveness

The effectiveness of the SMOKEFREE Site will be monitored by:

- Site audits to be carried out by members of the Executive Team, who will challenge any persons smoking on site, and who will report any staff to the relevant line manager.
- Joint site wide audits carried out by the Trust and Indigo to ascertain the number of staff smoking on the site. The results of these audits will be reported to the Trust Management Executive.
- Monthly reporting of related DATIX incidents to the Health and Safety Committee and the Staff Health and Wellbeing Group.

10 References and Associated Documentation

- ASH.org
- Health Act 2006
- The Children and Families Act 2014
- Health and Safety at Work Act
- NICE Guidance: Smoking: brief interventions and referrals (PH1)
- NICE Guidance: Stop Smoking Services (PH10)
- NICE Guidance: Smoking in Acute, Maternity and Mental Health Services (PH48)
- NICE Quality Standard: Smoking: harm reduction (QS92)
- NICE Quality Standard: Smoking: stopping in pregnancy and after childbirth (PH26)
- NICE Quality Standard: Smoking: reducing and preventing tobacco use (QS82)
- NICE Quality Standard: Smoking: supporting people to stop (QS43)
- Public Health Matters

Core Information				
Document Title	Control of Smoking Policy (Patients and Visitors)			
Date Finalised	May 2015			
Dissemination Lead	Facilities Assurance Manager			
Previous Documents				
Previous document in use?	None			
Action to retrieve old copies.	n/a			
Dissemination Plan				
Recipient(s)	When	How	Responsibility	Progress update
All staff	June 2015	Email / Vital Signs	Document Control	
All Senior Managers	June 2015	Email	Facilities Assurance Manager	
All Patients	September 2015	Patient letters	Patient Services, Patient Administration, and Communications	

Review		
Title	Is the title clear and unambiguous?	Yes
	Is it clear whether the document is a policy, procedure, protocol, framework, APN or SOP?	Yes
	Does the style & format comply?	Yes
Rationale	Are reasons for development of the document stated?	Yes
Development Process	Is the method described in brief?	Yes
	Are people involved in the development identified?	Yes
	Has a reasonable attempt has been made to ensure relevant expertise has been used?	Yes
	Is there evidence of consultation with stakeholders and users?	Yes
Content	Is the objective of the document clear?	Yes
	Is the target population clear and unambiguous?	Yes
	Are the intended outcomes described?	Yes
	Are the statements clear and unambiguous?	Yes
Evidence Base	Is the type of evidence to support the document identified explicitly?	Yes
	Are key references cited and in full?	Yes
	Are supporting documents referenced?	Yes
Approval	Does the document identify which committee/group will review it?	Yes
	If appropriate have the joint Human Resources/staff side committee (or equivalent) approved the document?	n/a
	Does the document identify which Executive Director will ratify it?	Yes
Dissemination & Implementation	Is there an outline/plan to identify how this will be done?	Yes
	Does the plan include the necessary training/support to ensure compliance?	Yes
Document Control	Does the document identify where it will be held?	Yes
	Have archiving arrangements for superseded documents been addressed?	Yes
Monitoring Compliance & Effectiveness	Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document?	Yes
	Is there a plan to review or audit compliance with the document?	Yes
Review Date	Is the review date identified?	Yes
	Is the frequency of review identified? If so is it acceptable?	Yes
Overall Responsibility	Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the document?	Yes

Core Information	
Manager	Director of Planning and Site Services
Directorate	Planning and Site Services
Date	May 2016
Title	Control of Smoking Policy (Patients and Visitors)
What are the aims, objectives & projected outcomes?	The Control of Smoking Policy (Patients and Visitors) sets out the measures that will be put in place to ensure the provision of a SMOKEFREE environment and Smoking Cessation advice and support in line with the Health Act 2006. The aim is to identify the Smoking status of Patients, and use this to reduce the level of smoking through the provision of signposting, advice, and support, including the use of Nicotine Withdrawal Therapies whilst in the care of the Trust. The Policy also seeks to discourage Visitors to Smoke whilst on Trust property, and describes the area which will be subject to enforcement.
Scope of the assessment	
Collecting data	
Race	There is no evidence to suggest that there will be an impact on race with regard to this policy
Religion	There is no evidence to suggest that there will be an impact on religion with regard to this policy
Disability	There is no evidence to suggest that there will be an impact on disability with regard to this policy
Sex	There is no evidence to suggest that there will be an impact on sex with regard to this policy
Gender Identity	There is no evidence to suggest that there will be an impact on gender identity with regard to this policy
Sexual Orientation	There is no evidence to suggest that there will be an impact on sexual orientation with regard to this policy
Age	There is no evidence to suggest that there will be an impact on age with regard to this policy
Socio-Economic	There is no evidence to suggest that there will be an impact on socio-economic circumstances with regard to this policy
Human Rights	As this policy requires compliance with the Human Rights Act 1998, there is no evidence to suggest there will be an impact on Human Rights.
What are the overall trends/patterns in the above data?	None

Specific issues and data gaps that may need to be addressed through consultation or further research	None			
Involving and consulting stakeholders				
Internal involvement and consultation	Trust Management Executive Trust Board			
External involvement and consultation	Indigo Livewell Plymouth SMOKEFREE Task Group			
Impact Assessment				
Overall assessment and analysis of the evidence	Consideration will be given if information is required in an alternative language or format. Consideration will be given to staff that require reasonable adjustment for training purposes.			
Action Plan				
Action	Owner	Risks	Completion Date	Progress update

1. Main Derriford Hospital Site



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2. Radiology Academy Site



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3. Child Development Centre Site



4. Plymouth Haemodialysis Unit

