



SMOKE FREE POLICY

1. INTRODUCTION

1.1 This policy underpins the Trust's commitment to valuing and promoting the health of its staff, patients, visitors and the North Derbyshire population.

2. POLICY STATEMENT

2.1 The policy supports the Trust's obligation to provide a safe and secure environment for everyone who uses its services and facilities.

2.2 The white paper 'Choosing Health' stated that by the end of 2006, all NHS organisations must be smoke free. This is also supported by NICE Guidance 2014.

2.3 The Trust has adopted a smoke free approach to comply with legislation and to support the promotion of the health of its staff, patients, visitors and the North Derbyshire population.

4. PROCEDURES

4.1 In adopting a smoke free approach the Trust remains committed to:

- Treating and caring for all patients – irrespective of whether they smoke or not
- Ensuring that sales of (and the advertising or promotion of) tobacco products is not permitted on its premises. The selling and dealing of illegal tobacco products is a criminal offence and will not be tolerated on Trust premises. The Trust will fully cooperate with enforcement agencies such as HM Revenue and Customs and Trading Standards, in their investigations. Any such illegal activity will be treated as gross misconduct and will result in disciplinary action
- Not investing in tobacco industries or tobacco related subsidiaries
- Supporting staff, patients and visitors who ask the Trust for help to give up smoking
- Re-enforcing the message that it is unacceptable to smoke within any NHS setting

5.0 ACTIONS

5.1 Staff, patients and visitors are not permitted to smoke inside Trust premises.

5.2 Staff, patients and visitors are not permitted to smoke in the ground and gardens of Trust premises.

5.3 Staff are not permitted to smoke whilst driving Trust vehicles.

5.4 Staff are encouraged not to smoke whilst off duty, but still in uniform - to present a professional image.

5.5 Within the terms of their tenancy staff are not permitted to smoke in any of the Trust's residential premises.

5.6 Staff from other external agencies, the ambulance service, social services, volunteers, students and contractors etc. are subject to the conditions of this policy whilst on Trust premises.

5.7 Staff who choose to smoke whilst on site will be subject to disciplinary action. Under the Health Act 2006 there are legally enforceable penalties for smoking and allowing smoking in enclosed and substantially enclosed premises.

6.0 STAFF WHO ARE REQUIRED TO WORK IN THE COMMUNITY

6.1 Some Trust employees may need to work in environments where it is difficult to control exposure to secondhand smoke for example in client homes etc.

6.2 In order to protect the health of the employee wherever possible the client should be asked not to smoke for at least an hour prior to the employee visiting the premises or at the very least whilst the employee is on the premises.

6.3 Employees who are worried about exposure to secondhand smoke in these circumstances should seek advice from their line manager who should arrange for a risk assessment to be carried out and all reasonable steps must then be taken to protect employees from exposure to secondhand smoke.

7.0 PATIENTS

7.1 The Health Act 2006 does not permit in-patients to smoke in Trust premises. This Trust policy does not allow smoking in the grounds at any time—irrespective of the period of time patients spend in hospital.

8.0 RELATIVES AND VISITORS

8.1 Relatives and visitors are not permitted to smoke - irrespective of the period of time they spend at the hospital with a patient.

9.0 SMOKE FREE PROMOTION AND CESSATION SUPPORT

9.1 For the policy to meet its objectives the Trust will provide support for staff, patients and others who wish to stop smoking.

9.2 For staff – the Trust will work with the Derbyshire Stop Smoking Service to provide stop smoking services.

9.3 For patients and visitors – ward and clinic staff will be able to provide general advice and support and refer clients to the Derbyshire Stop Smoking Service – Live Life Better Derbyshire (tel: 0800 085 2299)

9.4 Alternatively the hospital pharmacy maintains stocks of most forms of NRT including, patches, gum and inhalators. In order to make these readily available all ward pharmacists can access these without the need for a medical prescription. All clinical staff should be aware that this treatment is available and should be encouraged to prescribe it when undertaking their initial clerking. These two systems should ensure that all patients have rapid access to NRT and therefore should not need to continue to smoke whilst an inpatient. The availability of NRT as an alternative to patients who smoke should enable staff to challenge any patient who continues to smoke whilst an inpatient.

9.5 The Trust support promotion of the smoke free policy and stop smoking support by:

- Including information on appointment cards, in-patient and out-patient appointment letters, patient information, the website etc

- Installing appropriate signage in buildings, grounds and gardens
- Making reference to the smoke free status of the Trust in recruitment advertising, job descriptions and interviews
- Creating a sub-section of the staff disciplinary procedure in relation to smoking, that focuses on education, counselling and support.
- Including the policy within the Trust's terms and conditions of service
- Making reference to the policy in all staff induction sessions and fire lectures
- Provide access to training by the Derbyshire County Stop Smoking Service to appropriate Trust staff in Making Effective Brief Interventions, Signposting to the Stop Smoking Service and on delivering level two stop smoking advice and support.
- Use security personnel specifically trained to enforce the Trust's smoking policy in known smoking areas across the Trust's main hospital site.

10. ROLES AND RESPONSIBILITIES/IMPLEMENTATION

- 10.1 Responsibility for the implementation, upkeep and monitoring of this policy lies with the Medical Director.
- 10.2 All staff must ensure that the requirements of this policy are met and that the policy is adhered to within their areas of responsibility.
- 10.3 The policy also requires **all** staff who work for the Trust to support and adhere to the policy.
- 10.3.1 To notify security/fire safety officer if they witness breaches of the policy in specific areas so that action can be taken to 'police' these areas.
- 10.3.2 To notify their line manager or security services if they are subject to verbal abuse or other problems in relation to maintaining the policy.

11. TRAINING REQUIREMENTS

- 11.1 Support will be provided for staff to approach smokers on site to advise of our smoke free status.
- 11.2 Staff to be updated in the use of nicotine replacement therapy for inpatients.

12. MONITORING

- 12.1 The policy will be monitored and evaluated through:
- Risk reports and security reports
 - Review of the policy

13. KEYWORDS

- 13.1 Smoke free, nicotine replacement, smoking

14. RELATED POLICIES

- 14.1 Smoke Free Policy – Acting on Staff Non Compliance (HRP49)

15. EQUALITY IMPACT ASSESSMENT

- 15.1 Please see appendix 1

Date ratified:	Hospital Leadership Team – July 2016
First issued:	April 1995
Version no.:	1.0
Date issued:	August 2016
Review date:	August 2018
For review by:	Medical Director and Corporate Citizenship Committee
Director responsible:	Medical Director

EQUALITY IMPACT ASSESSMENT

Appendix 1

To be completed and attached to any procedural 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:		
	<ul style="list-style-type: none"> • Race 	NO	
	<ul style="list-style-type: none"> • Ethnic origins (including gypsies and travellers) 	NO	
	<ul style="list-style-type: none"> • Nationality 	NO	
	<ul style="list-style-type: none"> • Gender 	NO	
	<ul style="list-style-type: none"> • Culture 	NO	
	<ul style="list-style-type: none"> • Religion or belief 	NO	
	<ul style="list-style-type: none"> • Sexual orientation including lesbian, gay and bisexual people 	NO	
	<ul style="list-style-type: none"> • Age 	NO	
	<ul style="list-style-type: none"> • Disability – learning disabilities, 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 there any exceptions valid, legal and/or justifiable?	NA	
4.	Is the impact of the policy/guidance likely to be negative?	NA	
5.	Is so can the impact be avoided?	NA	
6.	What alternative are there to achieving the policy/guidance without impact?	NA	
7.	Can we reduce the impact by taking different action?	NA	