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Code: CP28

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## Nicotine Management Policy

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Type of document	Policy
Target audience	All clinical staff
Document purpose	The policy is concerned with providing a safe, smoke-free environment and health promotion for service users and staff. It supports service users and staff who don't wish to stop smoking in preventing harm to others from second hand smoke and in managing their nicotine dependency symptoms whilst in trust premises and grounds. The policy also supports service users and staff who do wish to stop smoking to access appropriate stop smoking services.

Approving meeting	Clinical Practice & Standards Sub-Committee	Date 26-Mar-20
Implementation date	26-Mar-20	

CWP documents to be read in conjunction with	
<a href="#">HR6</a>	Mandatory Employee Learning (MEL) policy
<a href="#">MP14</a>	Nicotine Replacement Therapy (NRT) guidelines
<a href="#">MH</a>	All mental health act policies
<a href="#">GR2</a>	Health and safety arrangements and responsibilities

Document change history	
What is different?	The March 2015 update to the CWP Nicotine Management Policy includes a statement to explain that inpatients are now advised that tobacco products, lighters and matches are not to be brought onto CWP wards and that if any of these products are found on ward areas they will be removed and disposed of.
Appendices / electronic forms	A quick reference flow chart has been added to the beginning of the policy to advise readers of the support offered to service users that smoke. This includes community and inpatient service users. There have been no alterations to the document appendices.
What is the impact of change?	The impact of the policy change in relation to service users not being able to bring tobacco products, lighters and matches onto the wards is to provide clarity to staff and service users about the CWP Nicotine Management Policy and to help support staff and service users to manage nicotine dependency and support policies offering service users access to nicotine replacement products and support during any inpatient stays in CWP. Information about the new policy in relation to CWP wards is being shared across the relevant inpatient and community mental health services.

Training requirements	Yes - Training requirements for this policy are in accordance with the CWP Training Needs Analysis (TNA) with Education CWP. Some training is provided to level 1 (assessment and brief interventions) and Level 2 (smoke free interventions, support and NRT prescription advice) smoking cessation by the local stop smoking
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	<p>specialists across the Trust.</p> <p>Further level 1 and 2 training is required for Trust staff and to support a sustainable in-house training programme it is recommended that key clinical staff will need to attend a 'train the trainer' course (to deliver level 1 and 2 training in the future). This training is being delivered and funded by the Mental Health Smoke Free NW project.</p> <p>The policy will be supported by staff trained in level 2, Stop Smoking – Mental Health, Specialist Practitioner Training who will be able to advise ward and community staff on policy implementation. The Trust will also review the roll out of the national e-learning module on health promotion/ smoking cessation (373 – SEL – Behavioural Change - Including Smoking Cessation) to identify which staff should be completing same.</p>
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Document consultation	
Clinical Services	Who within this service have you spoken to
Corporate services	Who within this service have you spoken to
External agencies	Who within this service have you spoken to

Financial resource implications	Yes - The current prescribing budget for CWP may need review depending on the prescription only medicines of Zybon and Varienline and where these are positioned in terms of 1st/2nd line treatment strategies
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External references
<ol style="list-style-type: none"> <li>1. Department of Health (2004) Choosing Health: Making healthier choices easier, London Department of Health</li> <li>2. Department of Health (2006) Health Act, London: Department of Health</li> <li>3. Health and Safety at Work etc Act 1974 (1974): Section 2.2 (e), Chapter 37. UK Legislation (Health and Safety)/UK Parliament Statutes</li> <li>4. Repace, 2003. "A Killer on the Loose"</li> <li>5. National Institute of Clinical Excellence (2006). Brief interventions and referral for smoking cessation in primary care and other settings. Public Health Intervention Guidance no.1</li> <li>6. Department of Health (2004) National Standards, Local Action: Health and Social Care</li> <li>7. Standards and Planning Framework 2005/06-2007/08, London: Department of Health, July 2004</li> <li>8. McCullagh J (2012) Smokefree Hospitals Briefing Paper. Heart of Mersey, December 2012.</li> </ol>

Equality Impact Assessment (EIA) - Initial assessment	Yes/No	Comments
Does this document 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 disabilities, physical disability, sensory impairment and mental health problems	No	
Is there any evidence that some groups are affected differently?	No	
If you have identified potential discrimination, are there any exceptions valid, legal and/or justifiable? N/A		
Is the impact of the document likely to be negative?	No	
- If so can the impact be avoided?	N/A	
- What alternatives are there to achieving the document without the impact?	N/A	

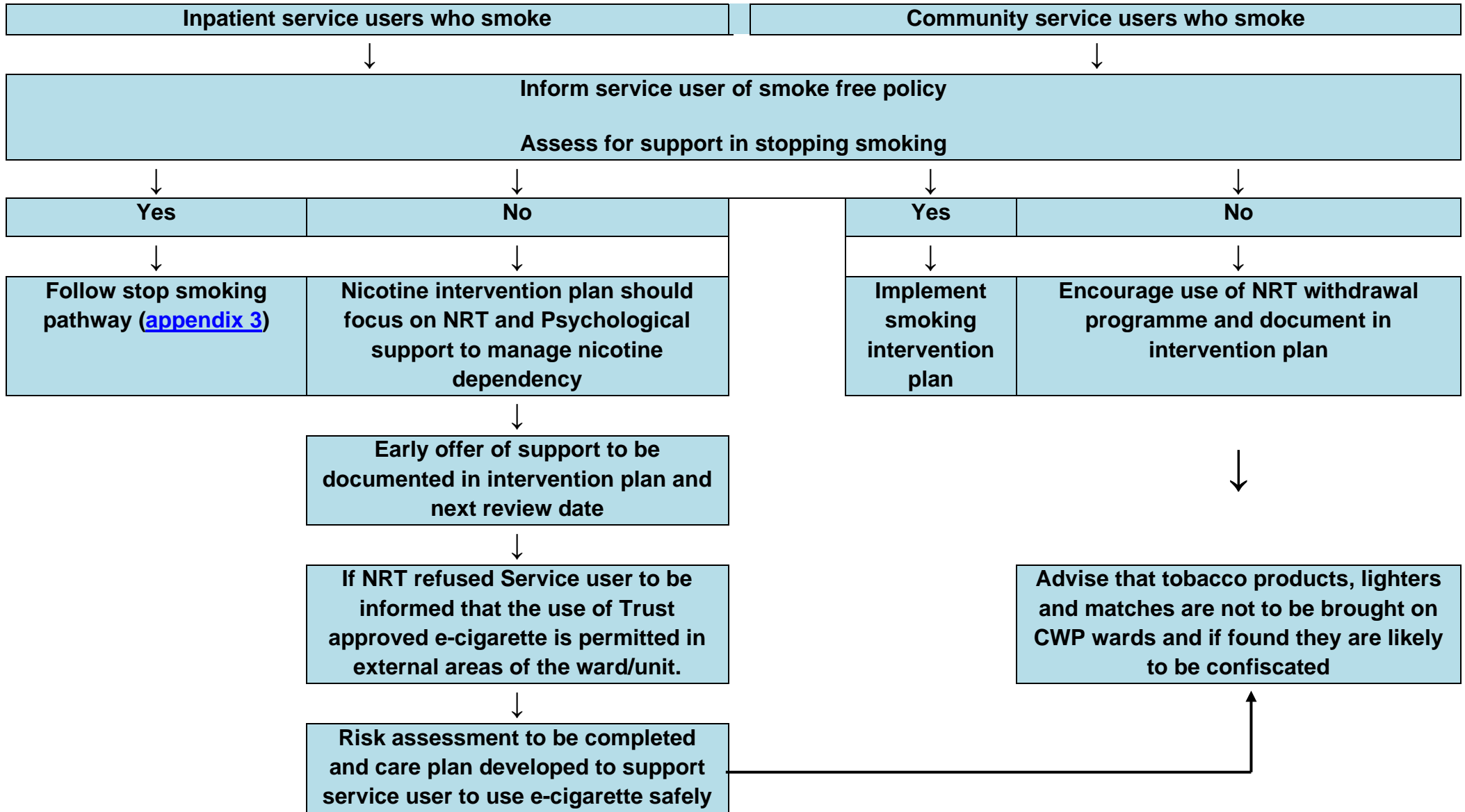
Equality Impact Assessment (EIA) - Initial assessment	Yes/No	Comments
- Can we reduce the impact by taking different action?	N/A	
<p>Where an adverse or negative impact on equality group(s) has been identified during the initial screening process a full EIA assessment should be conducted.</p> <p>If you have identified a potential discriminatory impact of this procedural document, please refer it to the human resource department 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 human resource department.</p>		
Was a full impact assessment required?	No	
What is the level of impact?	Low	

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**Quick reference flowchart for smokers**

For quick reference the guide below is a summary of actions required.



## 1. Introduction

Smoking remains the single largest preventable cause of ill health and premature death in England from respiratory disease (30% contribution), circulatory disease (13% contribution) and cancer (29% contribution).

One in two long-term smokers die prematurely as a result of smoking, half of these in middle age. On average, each smoker loses 10 years of life and experiences many more years of ill-health than a nonsmoker.

Smoking prevalence rates are significantly higher among people hospitalised with a mental health condition, where up to 70% of patients smoke and around 50% are heavy, more dependent smokers. On a local level, nearly half (46.4%) of service users of Mental Health Trusts across Cheshire and Merseyside are current smokers.

Such high levels of smoking impact on the health of this population and research has quantified that people living with a mental health condition have the poorest physical health. A recent UK study has highlighted that men and women living with schizophrenia die an average 20 and 16 years earlier than the national average and the death rate from respiratory disease is three times higher in this group.

Tobacco smoke contains over 4,000 chemicals, 69 of which are carcinogenic. Tobacco smoke not only damages a smoker's health but also the health of the people around them. Breathing other people's smoke is called passive or secondhand smoking (SHS).

The World Health Organisation (WHO) has listed SHS as a human carcinogen to which there is no safe level of exposure.

30 minutes exposure to SHS reduces blood flow to the heart in fit, healthy adults. Long term exposure increases a non-smoker's risk of developing heart disease and lung cancer by a quarter and stroke by three-quarters.

In terms of staff who smoke, an average smoker takes six 10-minute smoke breaks each day, which equates to an hour of lost productivity per smoker per day or five hours per week. The additional smoking breaks are often resented by non-smoking colleagues, which can cause tension between staff and lower morale. Implementing a smokefree secondary care site gives greater equity in break patterns. The National Institute of Health and Clinical Excellence (NICE) estimate that a person who smokes will take an additional 33 hours or 4.4 days off sick each year compared to a non-smoker. It has been estimated that CWP loses £1,879,645 per year in workforce productivity because of smoking (McCullagh, 2012).

Health care professionals are important role models in promoting healthy lifestyle behaviour and choices to patients, visitors and the community, including children. Observed smoking by staff, regardless of whether in uniform or not, gives the impression that tobacco smoking is acceptable and permitted on NHS sites. This, in turn, undermines levels of public confidence in adopting a smokefree lifestyle, portrays a mixed message regarding smokefree policy and lowers levels of compliance.

Staff smoking during business hours also subjects patients, both smokers and non-smokers, to the unpleasant smell of smoke whilst receiving NHS treatment and care.

Section 2(2)(e) 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'*.

NICE has issued public health guidance on brief interventions and referrals to specialist services to help people who smoke to stop for professionals working in local health services including mental health services. The Care Quality Commission (CQC) essential standards of quality and safety include a focus on strategic partnerships to tackle health inequalities and ill health by implementation of effective health promotion and health improvement programmes, including stop smoking support.

The British High Court (2008) ruled in the case Regina (G) v Nottingham Healthcare NHS Trust that smoking is not a basic human right and concluded that strict limitations upon smoking were justified. It is reasonable to expect the Trust to take action and therefore to preserve the health of patients and staff.

The policy is concerned with providing a safe, smoke-free environment and health promotion for service users and staff. It supports service users and staff who don't wish to stop smoking in preventing harm to others from secondhand smoke and in managing their nicotine dependency symptoms whilst in trust premises and grounds. The policy also supports service users and staff who do wish to stop smoking to access appropriate stop smoking services.

## **1. Aims**

The aim of this policy is to:

- To ensure that community service users have access to appropriate stop smoking support and that this is addressed fully as part of care planning;
- Provide appropriate support to service users and staff to manage the symptoms of nicotine dependency whilst in trust premises and grounds;
- Provide appropriate support for service users and staff to stop smoking;
- Protect and improve the health of staff, service users, visitors and contractors;
- Protect both smokers and non-smokers from the danger to their health of exposure to second-hand smoke;
- Set an example to other employers and workforces, particularly in health-related locations;
- Adhere to legislation (2006) to comply with smoke-free regulations, implemented in mental health services on 1 July 2008.

The policy is part of a range of policies that together comprise the Cheshire and Wirral Partnership NHS Foundation Trust (CWP) [health and safety arrangements and responsibilities](#).

## **2. Implementation**

This policy will apply to all staff, service users, visitors, contractors and other persons, who enter the CWP owned or rented buildings (or grounds) including vehicles parked on Trust grounds.

Its formal adoption commenced in February 2014.

All trust employees, visitors, contractors and other persons are not permitted to smoke on CWP premises or grounds.

Service users in community settings are asked to provide a smoke free room/environment if they are receiving home visits.

Staff who do not comply with the policy will be interviewed by their line manager and referred to occupational health for support and advice as appropriate. Should an individual or group of individuals continue to infringe this policy the manager may invoke disciplinary procedures as a means of encouraging adherence to this policy.

Stop smoking support is available to all service users and staff and nicotine replacement therapy (NRT) prescribed where appropriate. There will be staff from all services trained in stop smoking support.

Stop smoking support will be publicised through CWP (website, guidance and information leaflets, posters) – [appendix 1](#) and [appendix 2](#).

A [Nicotine Replacement Therapy](#) (guidelines) policy is available to support practitioners in the prescribing and administering of NRT.

### **3. Community service users**

All service users new to CWP services where appropriate will be informed of this smoke free policy at the earliest opportunity. They will be assessed for stop smoking support and a smoking intervention plan will be implemented (stop smoking pathway - [appendix 3](#)). Service users who do not wish to stop smoking will be encouraged to use NRT to assist with nicotine withdrawal symptoms and facilitate smoking abstinence during an inpatient stay.

Each offer of stop smoking support and NRT will be clearly documented in the intervention plan. The next review date will also be recorded.

In order to protect staff from second hand smoke, service users will be asked to provide a smoke free room for home visits and be asked to refrain from smoking throughout the visit. Failure to comply with this will mean that an alternative venue is arranged for visits, if appropriate.

All community appointment letters will inform service users of the Nicotine Management Policy, using the following wording:-

#### ***Cheshire and Wirral Partnership NHS Foundation Trust is a Smoke Free Organisation***

*We have a duty to protect staff from second hand smoke. If you are receiving a visit from a member of our staff then we request that you make a room available that is smoke free. Both yourself and your*



*family are requested not to smoke during our visit. If you are unable to provide such a room then please discuss with your care co-ordinator so that alternative arrangements can be made.*

Support and information will be offered to all service users.

Those service users who reside in supported living schemes or community residential settings and have private tenancy agreements cannot be regarded in the same way as those in inpatient services. Such settings are deemed as if they were a service user's home. Therefore the application of the policy concerning exposure to second hand smoke will need to be negotiated with the service user in order that maximum protection is afforded to staff and other service users i.e. use of an identified smoking area.

#### **4. Inpatient areas**

Service users that are admitted to an inpatient ward will have their smoking status recorded and a nicotine management intervention plan implemented. Service users will not be permitted to smoke on trust premises. From March 2015 a policy update was made to ensure that inpatients are advised that tobacco products, lighters and matches are not brought onto CWP wards, and that if any of these products are found on ward areas they will be removed and disposed of. If service users wish to stop smoking then the stop smoking pathway should be followed (appendix 3). Where a service user does not wish to stop smoking then the nicotine intervention plan should focus on providing NRT and psychological support to enable the patient to deal with the symptoms of nicotine dependency whilst an inpatient.

Service users who are already receiving smoking cessation pharmacotherapy prior to their admission will continue to receive support and remain in possession of their own supply of pharmacotherapy, if this is assessed to be safe / appropriate.

Each offer of stop smoking support and smoking cessation pharmacotherapy will be clearly documented in the intervention plan. The next review date will also be recorded.

#### **5. Staff**

The Trust recognises that smoking is addictive and adherence to this smoke free policy will be a challenge for some members of staff. Staff will be able to access stop smoking support and advice from appropriately trained workplace colleagues, the occupational health service and local NHS stop smoking services.

CWP will support staff in accessing these services, by appointment, during working hours in agreement with their line manager. Stop smoking services can offer help, advice, access to smoking cessation treatment, pharmacotherapy, and problem solving to staff who wish to stop smoking ([appendix 1](#)).

Staff who do not want to stop smoking will be encouraged to use NRT to manage the symptoms of nicotine dependency whilst on duty.

Job advertisements will include reference to the Nicotine Management Policy and indicate that the adherence will be contractual. Tenders and contractors with CWP will stipulate adherence to this policy as a contractual condition. Contracts will be modified to reflect this.

To ensure that everybody entering CWP sites understands that smoking is not allowed in the buildings and grounds, clear signs will be displayed.

Staff will not be permitted to smoke whilst on duty, in uniform or when undertaking Trust business. The Trust will not financially support extra time for smoking in addition to standard breaks.

All employees are responsible for ensuring that the Trust's policy for a smoke free site is enforced within the buildings and grounds.

Staff must not smoke with service users or carers whilst at work under any circumstances.

CWP prohibits the selling and purchasing of tobacco products and associated paraphernalia on site or during working hours. Staff within CWP must not be subjected to second hand smoke as part of their work for the Trust.

## **6. Support**

A cross-section of clinical / non-clinical staff will be trained in stop smoking brief intervention (level 1). They will be able to offer advice and support, and signpost service users and work-place colleagues to Stop Smoking Services. Staff trained to Level 1 can actively support Interventions planned by staff trained to Level 2.

Identified staff will be trained as stop smoking advisor (level 2) enabling them to deliver stop smoking intervention and advise medical staff on the most suitable prescription of NRT for the individual.

Identified staff will be trained to deliver levels 1 and 2 stop smoking intervention training to other Trust staff. Where feasible and where there is sufficient demand, stop smoking clinics will be available on site to provide the appropriate support to both staff and service users to help them stop smoking.



Cheshire and Wirral Partnership



NHS Foundation Trust

## **STAFF INFORMATION ON STOP SMOKING SUPPORT**

Cheshire and Wirral Partnership NHS Foundation Trust  
is committed to supporting staff who wish to Stop Smoking

Stop Smoking support is available through a range of options. Staff can request advice from a number of appropriately trained workplace colleagues, the local NHS Stop Smoking Service and the Occupational Health Service.

The trust will support staff in accessing these services, by appointment, during working hours in agreement with their line manager. Stop Smoking services can offer help, advice, and access to smoking cessation medications and problem solving to staff who wish to stop smoking.  
(Smoke Free Policy)

### **SUPPORT CAN BE ACCESSED AT THE FOLLOWING LOCATIONS**

#### **WESTERN CHESHIRE**

Stop Smoking  
Service Tel: 0800  
043 5134  
Text: quit4good  
to 60777  
Email:  
[quit@quit4good.org](mailto:quit@quit4good.org)  
Web:  
[www.quit4good.org](http://www.quit4good.org)

#### **WIRRAL**

Stop Smoking  
Service Tel: 0151  
630 8383  
Text: QUIT to  
80039 plus name  
and postcode  
Email:  
[wsupport@wirralct.nhs.uk](mailto:wsupport@wirralct.nhs.uk)  
Web:  
[www.quitstopwirral.co.uk](http://www.quitstopwirral.co.uk)

#### **CENTRAL & EAST CHESHIRE**

Stop Smoking Service  
Tel: 0800 085 8818  
Text: QUIT to 80039  
plus name and  
postcode  
Web: [www.stop-smoking-  
cheshire.co.uk](http://www.stop-smoking-cheshire.co.uk)

#### **Trust Occupational Health Departments**

- West Cheshire Tel: 01244 364646
- Wirral Tel: 0151 604 7262
- Central Cheshire Tel: 01270 612372
- East Cheshire: Tel: 01625 661896

Support is also available from GP practices via appointment with your GP.

Local Pharmacies also offer support and brief interventions. A list is available from your local Stop Smoking Service or G

**NHS NATIONAL STOP SMOKING HELPLINE: 0800 022 4 332**



Cheshire and Wirral Partnership



NHS Foundation Trust

**INFORMATION ON STOP SMOKING SUPPORT FOR SERVICE USERS**

**Cheshire and Wirral Partnership NHS Foundation Trust**

is committed to supporting service users who wish to Stop Smoking

Stop Smoking support is available through a range of options. Service users can request advice from members of staff who are appropriately trained to offer Stop Smoking support. Service users can also access Stop Smoking support through local NHS Stop Smoking Services as listed below.

The trust will support service users in accessing these services.

Stop Smoking services can offer help, advice, and access to smoking cessation medications and problem solving to service users who wish to stop smoking.

**SUPPORT CAN BE ACCESSED AT THE FOLLOWING LOCATIONS**

**WESTERN CHESHIRE**

**Stop Smoking Service**

**Tel: 0800 043 5134**

**Text: quit4good to 60777**

Email: [quit@quit4good.org](mailto:quit@quit4good.org)

Web: [www.quit4good.org](http://www.quit4good.org)

**WIRRAL**

**Stop Smoking Service**

**Tel: 0151 630 8383**

**Text: QUIT to 80039 plus name and postcode**

Email: [wsupport@wirralct.nhs.uk](mailto:wsupport@wirralct.nhs.uk)

Web: [www.quitstopwirral.co.uk](http://www.quitstopwirral.co.uk)

**CENTRAL & EAST CHESHIRE**

**Stop Smoking Service**

**Tel: 0800 085 8818**

**Text: QUIT to 80039 plus name and postcode**

Web: [www.stop-smoking-cheshire.co.uk](http://www.stop-smoking-cheshire.co.uk)

Support is also available from GP practices via appointment with your GP.

Local Pharmacies also offer support and brief interventions. A list is available from your local Stop Smoking Service or GP.

**Please be aware:** As of the 1<sup>st</sup> July 2008, should anyone require admission into hospital, they will not be able to smoke in any of the buildings or grounds.

**A leaflet, "Smoke Free – What does it mean for me?" is also available.**

**NHS NATIONAL STOP SMOKING HELPLINE: 0800 022 4 332**

Mon to Fri: 9am to 8pm, Sat and Sun: 11am to

5pm or chat to an advisor online at:

[www.smokefree.nhs.uk](http://www.smokefree.nhs.uk)

### Appendix 3 – Stop Smoking Pathway

