

Creating a Smoke Free Workplace Policy

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Purpose of Agreement	To safeguard the rights of patients, employees, and visitors to be in a tobacco smoke free environment and to comply with smoke-free legislation and provide support to help people stop smoking.
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Review and amendment log

Version Number	Review date	Amendment section no.	Page	Amendment made / summary	Changes approved by
Version 1	January 2010			L. Bicknell	Policy group
Version 2	September 2014			 M. Tarrant New Policy format Updated information in line with legislation, guidance, and practice Further guidance has been added for Community workers who are visiting clients at home and may be exposed to smoke 	Policy group
Version 3	December 2017			 M. Tarrant The content of this policy document has been reduced and is now supported by a Guidance document. There are minimal changes to the content held within both the Policy and guidance document. 	Policy group
Version 4	December 2020			 M.Tarrant Search undertaken to check for policy/legislative changes and no changes found which affect policy Chair's action approved 	Chair's action – agreed to extend current policy to May 2022
Version 5	April 2022			 M. Middleton There are minimal changes to the content held within both the Policy and guidance document. 	Policy Steering Group, Clinical Executive Group

SUMMARY OF POLICY

As a healthcare organisation with a responsibility to promote health and protect people from the harmful effects of tobacco products this policy defines the Trust position to ban the use of tobacco products by employees, patients and visitors on Trust owned property and for employees in the course of carrying out their duties irrespective of the setting.

The Policy acknowledges the importance of offering information, advice, and support for people to stop smoking. It also recognises the challenges faced by smokers and in particular patients' resident in ward areas and the wide range of environments where employees may work e.g., hospitals, community settings, Trust vehicles and in premises owned by other organisations. It also recognises the difficulties associated with control measures to protect staff visiting patients that smoke in their own homes.

The Policy is supported by the Standard Operating Procedures for Employees Creating a Smoke Free Workplace, relating to employees and protocols for patient areas to take into account the wide range of people and physical settings covered by this Policy.

Table of Contents

Insert table of contents here. This table is provided just for easy use.

Item	Contents	Page
1	INTRODUCTION AND PURPOSE	
2	SCOPE AND DEFINITION	
3	ROLES AND RESPONSIBILITES	
4	TRAINING	
5	REVIEW	
6	REFERENCES	
7	EQUALITY IMPACT ASSESSMENT	
	Appendices	
	Appendix A : Equality Impact Assessment	

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1. INTRODUCTION & PURPOSE

- 1.1 It is recognised that smoking materials are a fire risk and a serious health hazard. The smoking of tobacco products, e-cigarette/vapour is therefore prohibited in Solent NHS Trust owned sites and on the surrounding grounds, including the car parks and Trust owned vehicles. The sale of smoking products is also prohibited on Solent NHS Trust premises. For Adult Mental Health Inpatient Unit please refer to the Solent NHS Trust In-patient Smoke free protocol for the use of e-cigarettes where patients can use these devises in accordance with the protocol. Staff who wish to use an E-Cigarette will need to provide this themselves and follow the E-Cigarette guidance
- 1.2 Solent NHS Trust is a healthcare care organisation with a responsibility to promote health and as such employees must take account of the need to maintain a professional image and are therefore not permitted to smoke when carrying out their duties and responsibilities for the Trust. Employees that choose to smoke off site during break periods must take steps to remove their Trust name badge and to completely cover their uniform to ensure the professional image of the Trust is not compromised and to protect the uniform/work clothing from the odour of smoke.
- 1.3 Patients having consultations or receiving treatment from Trust Services presents many patients with an ideal opportunity to stop smoking. The Trust is committed to providing practical help, support and advice to patients who wish to take advantage of this opportunity.
 - It is also recognised that this policy will impact on smokers working lives. Solent NHS Trust is therefore committed to supporting employees that would like to quit smoking. Further details on accessing support can be found in the Standing Operating Procedure for Creating a Smoke free Workplace.
- 1.4 This Policy should be read and used in conjunction with other relevant documents/guidance:
 - Solent NHS Trust Standing Operating Procedure Creating a Smoke Free Workplace
 - Solent NHS Trust Inpatient Smoke free protocol
 - Solent NHS Trust Nicotine Replacement Therapy (NRT) Inpatient Guidelines
 Smoke Free Protocol
 - Solent NHS Trust Health and Safety Policy
 - Solent NHS Trust Fire Safety Policy
 - NICE Guidance PH48 Smoking: acute, maternity, and mental health services
 - Solent guidance for the use of E-Cigarettes (Smoking Cessation Service 2016)
 - Solent NHS Trust Health & Wellbeing Strategy

2. SCOPE & DEFINITIONS

This policy applies to locum, permanent, and fixed term contract employees (including apprentices) who hold a contract of employment or engagement with the Trust, and

secondees (including students), volunteers (including Associate Hospital Managers and Patient Safety Partners), bank staff, Non-Executive Directors and those undertaking research working within Solent NHS Trust, in line with Solent NHS Trust's Equality, Diversity and Human Rights Policy. It also applies to external contractors, agency workers, and other workers who are assigned to Solent NHS Trust. The Policy also applies to patients, visitors / members of the public. Solent NHS Trust is committed to the principles of Equality and Diversity and will strive to eliminate unlawful discrimination in all its forms.

We will strive towards demonstrating fairness and Equal Opportunities for users of services, carers, the wider community, and our staff.

3. ROLES & RESPONSIBILITIES

3.1 The Chief Executive

The Chief Executive has the overall accountability for the activities of the Organisation and should ensure they have the appropriate assurance that the requirement of Health & Safety legislation relating to creating a smoke-free workplace is met.

3.2 Operational Directors, Head of Service and Department Managers

Managers are responsible for ensuring the promotion, implementation, and compliance of the policy and in supporting patients and employees to quit smoking and where feasible to support time for employees to attend local Stop Smoking Service to initiate a cessation support programme.

3.3 Employees

All employees have a duty to ensure they comply with the Policy to create a smoke free workplace and that they do not commit action which could lead to an outbreak of fire or endanger the health of others. Employees who do smoke are encouraged to seek support from the Stop Smoking Services to make a quit attempt with behavioural support and pharmacotherapy.

3.4 Estates and Facilitates Team

The estates team should ensure that appropriate no smoking signs are clearly displayed at the entrances to and within the premises, and in all Trust smoke- free vehicles. Where applicable, Security staff are responsible for monitoring compliance and for taking action to request compliance with the Policy and supporting staff to achieve this where necessary.

3.5 Stop Smoking Services Our OH & Wellbeing service will provide information and signposting to specialist Stop Smoking Services and on the harmful effects of smoking and how to seek help to quit. We will work with staff to identify the most appropriate support and service e.g. accessing specialist stop smoking services to access Nicotine Replacement Therapy (NRT) products.

4. TRAINING

Training for smoking cessation is available from National Centre for Smoking Cessation (NCSCT) online training: NCSCT - National Centre for Smoking Cessation and Training

5. REVIEW

This policy may be reviewed at any time at the request of either staff side or management, or in response to changes in Legislation/Guidance/best practice. It will be automatically reviewed on a 3-yearly basis.

6. REFERENCES

- Health & Safety at Work Act 1974
- Health Act 2006.
- **■** Smoke Free England
- **Solent NHS Trust Fire Safety Policy**
- HR13 Improving and Managing Conduct Policy v1 previously known as Disciplinary Policy
- Action on Smoking and Health (ASH):
- NICE Guidance PH48 Smoking: acute, maternity and mental health services
- Smoke free NHS
- **■**Solent NHS Trust Smoke free Protocol
- Solent NHS Trust E-Cigarette Guidance

7. EQUALITY IMPACT ASSESSMENT

Solent NHS Trust is committed to treating people fairly and equitably regardless of their age. disability; gender; reassignment; marriage or civil partnership; pregnancy and maternity; race. religion or belief; sex; or sexual orientation.

An equality and human rights impact assessment has been carried out for the purpose of this policy and no significant issues have been identified (See Appendix A).

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Appendix A

Equality Analysis and Equality Impact Assessment

Equality Analysis is a way of considering the potential impact on different groups protected from discrimination by the Equality Act 2010. It is a legal requirement that places a duty on public sector organisations (The Public Sector Equality Duty) to integrate consideration of Equality, Diversity and Inclusion into their day-to-day business. The Equality Duty has 3 aims, it requires public bodies to have due regard to the need to:

- **eliminate unlawful discrimination**, harassment, victimisation and other conduct prohibited by the Equality Act of 2010.
- advance equality of opportunity between people who share a protected characteristic and people who do not.
- foster good relations between people who share a protected characteristic and people who
 do not.

Equality Impact Assessment (EIA) is a tool for examining the main functions and policies of an organisation to see whether they have the potential to affect people differently. Their purpose is to identify and address existing or potential inequalities, resulting from policy and practice development. Ideally, EIAs should cover all the strands of diversity and Inclusion. It will help us better understand its functions and the way decisions are made by:

- considering the current situation
- deciding the aims and intended outcomes of a function or policy
- considering what evidence there is to support the decision and identifying any gaps
- ensuring it is an informed decision

You can find further information via the e-learning module here

Equality Impact Assessment (EIA)

Step 1: Scoping and Identifying the Aims

Service Line / Department	Corporate-Occupational Health & Wellbeing Service		
Title of Change:	Review requirement and information update		
What are you completing this EIA for? (Please select):	Report (If other please specify here)		
What are the main aims / objectives of the changes	To safeguard the rights of patients, employees, and visitors to be in a tobacco smoke free environment and to comply with smoke-free legislation and provide support to help people stop smoking. This policy outlines procedures and guidelines for support and advice.		

Step 2: Assessing the Impact

Please use the drop-down feature to detail any positive or negative impacts of this document /policy on patients in the drop-down box below. If there is no impact, please select "not applicable":

Protected Characteristic	Positive	Negative	Not	Action to address negative impact:
	Impact(s)	Impact(s)	applicable	(e.g. adjustment to the policy)
Sex			√	

Gender reassignment		\checkmark	
Disability		√	
Age		√	
Sexual Orientation		√	
Pregnancy and		√	
maternity			
Marriage and civil		√	
partnership			
Religion or belief		\checkmark	
Race		√	

If you answer yes to any of the following, you MUST complete the evidence column explaining what information you have considered which has led you to reach this decision.

Assessment Questions	Yes / No	Please document evidence / any mitigations
In consideration of your document		No
development, did you consult with	Please	
others, for example, external	select	
organisations, service users, carers or	Select	
other voluntary sector groups?)		
Have you taken into consideration any	Please	No
regulations, professional standards?	select	

Step 3: Review, Risk and Action Plans

How would you rate the overall level of impact /	Low	Medium	High
risk to the organisation if no action taken?			
What action needs to be taken to reduce or	N/A		
eliminate the negative impact?			
Who will be responsible for monitoring and regular	Hilary Todd/ Mo N	/liddleton	
review of the document / policy?			

Step 4: Authorisation and sign off

I am satisfied that all available evidence has been accurately assessed for any potential impact on patients and groups with protected characteristics in the scope of this project / change / policy / procedure / practice / activity. Mitigation, where appropriate has been identified and dealt with accordingly.

Equality		Date:	06/04/2022	
Assesso	:			

Additional guidance

	ected acteristic	Who to Consider	Example issues to consider	Further guidance
1.	Disability	A person has a disability if they have a physical or mental impairment which has a substantial and long-term effect on that person's ability to carry out normal day today activities. Includes mobility, sight, speech and language, mental health, HIV, multiple sclerosis, cancer	 Accessibility Communication formats (visual & auditory) Reasonable adjustments. Vulnerable to harassment and hate crime. 	Further guidance can be sought from: Solent Disability Resource Group
2.	Sex	A man or woman	 Caring responsibilities Domestic Violence Equal pay Under (over) representation 	Further guidance can be sought from: Solent HR Team
3	Race	Refers to an individual or group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.	 Communication Language Cultural traditions Customs Harassment and hate crime "Romany Gypsies and Irish Travellers", are protected from discrimination under the 'Race' protected characteristic 	Further guidance can be sought from: BAME Resource Group
4	Age	Refers to a person belonging to a particular age range of ages (e.g., 18-30-year olds) Equality Act legislation defines age as 18 years and above	 Assumptions based on the age range Capabilities & experience Access to services technology skills/knowledge 	Further guidance can be sought from: Solent HR Team
5	Gender Reassignment	"The expression of gender characteristics that are not stereotypically associated with one's sex at birth" World Professional Association Transgender Health 2011	Tran's people should be accommodated according to their presentation, the way they dress, the name or pronouns that they currently use.	Further guidance can be sought from: Solent LGBT+ Resource Group
6	Sexual Orientation	Whether a person's attraction is towards their own sex, the opposite sex or both sexes.	 Lifestyle Family Partners Vulnerable to harassment and hate crime 	Further guidance can be sought from: Solent LGBT+ Resource Group
7	Religion and/or belief	Religion has the meaning usually given to it, but belief includes religious and philosophical beliefs, including lack of belief (e.g. Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition. (Excludes political beliefs)	 Disrespect and lack of awareness Religious significance dates/events Space for worship or reflection 	Further guidance can be sought from: Solent Multi-Faith Resource Group Solent Chaplain
8	Marriage	Marriage has the same effect in relation to same sex couples as it has in relation to opposite sex couples under English law.	PensionsChildcareFlexible workingAdoption leave	Further guidance can be sought from: Solent HR Team
9	Pregnancy and Maternity	Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In non-work context, protection against maternity discrimination is for 26 weeks after giving birth.	 Employment rights during pregnancy and post pregnancy Treating a woman unfavourably because she is breastfeeding Childcare responsibilities Flexibility 	Further guidance can be sought from: Solent HR team