

Policy Under Review

Please note that this policy is under review. It does, however, remain current Trust policy subject to any recent legislative changes, national policy instruction (NHS or Department of Health), or Trust Board decision. For guidance, please contact the Author/Owner.

Information Category	Detailed Information
Document Title:	Smoke Free Policy HSP 023 V4.1
This document replaces (exact title of previous version):	Smoke Free Policy V4.0
Date Issued / Approved:	September 2022
Date Valid From:	December 2022
Date Valid To:	May 2026
Author / Owner:	Gavin Griffiths, Head of Health, Safety, Moving and Handling.
Contact details:	01872 252266
Brief summary of contents:	The policy aims to maintain a smoke-free environment on Trust premises and assist staff, patients and visitors achieve improved health through smoking cessation.
Suggested Keywords:	Smoking, no smoking, tobacco control, smoke-free.
Target Audience:	RCHT: Yes CFT: No CIOS ICB: No
Executive Director responsible for Policy:	Deputy Chief Executive and Chief Nursing Officer
Approval route for consultation and ratification:	Executive Members, Trust health and Safety committee, JCNC/JLNC.
Manager confirming approval processes:	Gavin Griffiths, Head of Health, Safety, Moving and Handling.

Information Category	Detailed Information
Name of Governance Lead confirming consultation and ratification:	Natasha Quick, Service Improvement and Business Lead (Health).
Links to key external standards:	• Health Act 2006. • Health and Safety at Work etc. Act 1974. • NICE Guidance. WHO Guidance electronic cigarettes.
Related Documents:	Trust Disciplinary Policy and Procedure.
Training Need Identified:	Yes.
Publication Location (refer to Policy on Policies – Approvals and Ratification):	Internet and Intranet
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This document is only valid on the day of printing.

Controlled Document.

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Smoke Free Policy

HSP 023

V4.1

December 2022

Summary

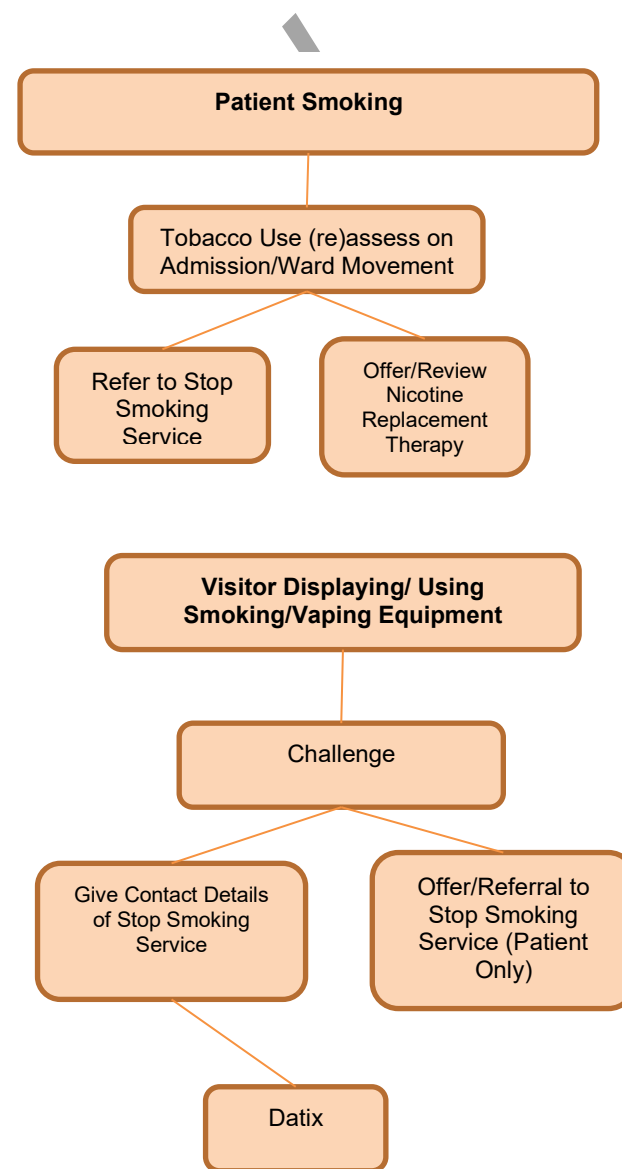


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Data Protection Act 2018 (General Data Protection Regulation – GDPR) Legislation

The Trust has a duty under the Data Protection Act 2018 and General Data Protection Regulations 2016/679 to ensure that there is a valid legal basis to process personal and sensitive data. The legal basis for processing must be identified and documented before the processing begins. In many cases we may need consent; this must be explicit, informed, and documented. We cannot rely on opt out, it must be opt in.

Data Protection Act 2018 and General Data Protection Regulations 2016/679 is applicable to all staff; this includes those working as contractors and providers of services.

For more information about your obligations under the Data Protection Act 2018 and General Data Protection Regulations 2016/679 please see the Information Use Framework Policy or contact the Information Governance Team

Royal Cornwall Hospital Trust rch-tr.infogov@nhs.net

1. Introduction

- 1.1. Smoking is the leading preventable cause of illness and premature death in the UK, every year around 78,000 people die from smoking. The Government continues to take active measures to decrease smoking behavior by encouraging cessation and reducing the number of public places in which smoking is permitted. Stopping smoking is one of the most cost-effective health interventions anyone can make at both personal and healthcare level.
- 1.2. As one of the main providers of healthcare services in Cornwall, Royal Cornwall Hospitals NHS Trust (RCHT) is committed to maintaining smoke free trust premises and to assist staff, patients and visitors to achieve improved health through smoking cessation.
- 1.3. Notwithstanding the legal requirement for all enclosed workplaces and public spaces to be smoke free from July 2007, in accordance with the Health Act 2006, the Trust also recognises its legal obligation under sections 2 and 3 of the Health and Safety at Work etc. Act 1974, to: provide and maintain a working environment that is, so far as is reasonably practicable, safe and without risks to health.
- 1.4. The trust acknowledges that breathing other people's smoke is both a public hazard and a welfare issue which is proven to cause ill health and believes that all staff, patients, visitors, contractors, and other persons who enter RCHT sites have the right to breathe smoke-free air.
- 1.5. This policy is not concerned with whether an individual smokes but with where and when they smoke and the effect this has on staff, patients, visitors, contractors, and any other persons who enter RCHT sites for any purpose.
- 1.6. RCHT actively encourages its staff to refrain from smoking at any time both in their own interests and as representatives of a major public body whose purpose is to improve health. However, this issue falls outside the scope of this policy.
- 1.7. This version supersedes any previous versions of this document.

2. Purpose of this Policy/Procedure

- 2.1. This policy seeks to:
 - Promote a healthy working environment, protecting the current and future staff, patients and visitors.
 - Protect the right of everyone to breathe in air free from tobacco smoke.
 - Comply with statutory obligations including the Health Act 2006, health and safety and employee legislation.
 - Raise awareness of the dangers associated with exposures to tobacco smoke and the benefits of not smoking.
 - Take account of the needs of those who choose to smoke and support those who wish to stop.

- Support the Trust in meeting the requirements of CQUIN 9 preventing ill health by risky behaviours – alcohol and tobacco (2017 – 2019).

2.2. The aim of this policy is to:

- Protect and improve the health of staff.
- Protect and improve the health of patient, visitors and contractors.
- Set an example to others and workforces, particularly in health-related locations.
- Inform staff and managers of their responsibilities in respect of the policy.
- Support smokers to help them cope with increased restrictions or to stop smoking.
- Support patients and visitors in complying with the policy and/or using their stay in hospital as an opportunity to stop smoking.
- Promote a culture of a smoke-free health service.

3. Scope

- 3.1. The policy applies to all persons on any of the RCHT sites, including staff (medical and non-medical irrespective of grade). Agency workers, students, volunteers, contractors, patients, visitors and anyone whose work, study or personal circumstances brings them into RCHT premises and or grounds.
- 3.2. The policy is applicable to all Trust property and premises without exception, including inside and outside all Trust buildings, the hospital grounds and car parking areas, associated sites and vehicles.
- 3.3. People smoking at the entrance to NHS buildings, give a very poor impression of the health organisation. Having smoke-free grounds as well as buildings sends a strong message from the organisation about the established dangers of smoking second-hand smoke.

4. Definitions / Glossary

Smoking

Refers to:

- a) Smoking tobacco or anything which contains tobacco, or smoking any other substance and
- b) Includes being in possession of lit tobacco, or of anything lit which contains tobacco or being in possession of any other lit substance in a form in which it can be smoked.

Second-hand smoking	Breathing other people's tobacco smoke. When smokers and non-smokers cannot avoid inhaling some of the smoker's tobacco smoke.
The Trust	The Royal Cornwall Hospital NHS Trusts (RCHT).
Site or Premises	Any area or building owned, controlled, or occupied by the Trust or its agents.
Trust Vehicle	Any vehicle owned, controlled or used to carry out any activities or business for or on behalf of the Trust.
Trust Business	Activities carried out for or on behalf of the Trust including travelling to/from sites, travel to patients/clients, carriage of goods, materials, etc. used or to be used by the Trust.
Staff	All persons employed. Whether paid or unpaid, whether by written or implied contract or other agreement, to carry out specific or general Trust business (including volunteers, agency, work placement, students, honorary contractors, etc.
Contractors	Any persons employed by a third party to undertake work on any trust site in any activity, for or on behalf of the Trust.
CQUIN	Commissioning for Quality and Innovation, NHS England.
Enclosed/substantially enclosed area	Any area, building or structure, permanent or temporary that is, in total, more than 50% enclosed.
NRT	Nicotine Replacement Therapies, including, but not restricted to, nicotine patches, gums and medication.
Smokers Materials	Cigarettes, cigarette filters, cigarette papers, cigars, pipes, holders of smoking materials of all types, cigarette rolling machines.
E-cigarette / Electronic cigarette devices	Devices containing a nicotine-based liquid that is vaporized and inhaled and used to stimulate the experience of smoking tobacco. Includes reusable and disposable electronic cigarettes (e-cigarettes), cigars, pipes and similar battery powered tobacco replacement products which use a heating element (atomizer) to produce a vapour which resembles smoke. Such devices may also be referred to as Electronic Nicotine Delivery Systems (ENDS),

personal vaporizer (PV) or a re-usable cigarette.

Vaping The use of electronic cigarettes, personal vaporizers (PV's) and similar devices.

TDAG Tobacco Dependency Action Group.

5. Ownership and Responsibilities

5.1. Role of the Chief Executive and Trust Board

The Chief Executive of the Trust retains overall accountability for ensuring compliance with all aspects of statutory duties. Responsibility for the implementation of some or all aspects of duties included in this document may be delegated to the senior managers of the Trust as detailed below.

5.2. Role of the Deputy Chief Executive and Chief Nursing Officer

The Deputy Chief Executive and Chief Nursing Officer is responsible for directing the expert reference group to:

- 5.2.1. Develop, implement and monitor the smoke free policy.
- 5.2.2. Review the policy at least three years or before in the light of any failures of the system or changes in legislation or by the appropriate national authority and or best practice.
- 5.2.3. Ensure adequate resources are made available to implement the policy and carry out any remedial action or amendments required.
- 5.2.4. Lead on the CQUIN 9" preventing ill health by risky behaviors-alcohol and tobacco"1. Ensuring all patients are assessed for dependency on tobacco/nicotine and dependency management strategies are implemented in a timely and individual manner.
- 5.2.5. Ensuring nursing and appropriate allied healthcare professionals are trained to identify and support patients with tobacco dependency.

5.3. Role of the Chief Operating Officer

As the named executive director with responsibility for health and safety the Chief Operating Officer shall ensure that this document receives consultation and approval by the Health and Safety Committee prior to publication.

5.4. Role of the Director of Human Resources and Organisational Development

- 5.4.1. All staff abide by the requirements of this document, through the organisations management structure.

- 5.4.2. Staff are encouraged and supported to stop the use of tobacco in any form.
- 5.4.3. Occupational Health staff and nominated Health and Wellbeing Champions undertake appropriate training to support staff during smoking cessation.
- 5.4.4. Working in conjunction with the Cornwall and Isles of Scilly Health Promotion Service. Smoking Cessation staff are available and provided with appropriate accommodation and services. On site on a regular basis to support staff and patients throughout the Trust.
- 5.4.5. Staff found in breach of the requirements, in word or spirit, of this document are appropriately and fairly dealt with in accordance with the Trust disciplinary procedures.

5.5. Role of Other Executive Directors, Senior Managers and Managers

- 5.5.1. Ensuring the policy is enforced within their area of management responsibility.
- 5.5.2. Reviewing operations to identify situations where a restriction on smoking may cause staff to be exposed to foreseeable risks e.g., verbal abuse, when enforcing this policy, documenting the findings in a formal Risk Assessment, in accordance with the Trust Risk Management Policy and procedures.
- 5.5.3. Ensuring that any incident of abuse (verbal, physical or other) is properly reported and investigated using the Trust's incident reporting system DATIX.
- 5.5.4. Ensuring that any staff members who wish to stop smoking are signposted to enable them to receive appropriate support, guidance and encouragement to achieve their goal.
- 5.5.5. Ensure that all staff are aware of the requirements and expectations of this document.
- 5.5.6. Ensuring any staff breaches of this policy are dealt with in accordance with the Trust's Disciplinary Policy and Procedure.

5.6. Role of Occupational Health

The Occupational Health Department will provide advice, information and assistance on any aspect of this policy and support to staff wishing to stop smoking or for temporary abstinence.

5.7. Role of Staff

All Staff members are required to uphold and maintain the policy and raise awareness with patients, visitors and contractors.

6. Standards and Practice

6.1. Restrictions on smoking

- 6.1.1. Smoking is not permitted on any part of the premises that are managed, leased or owned or otherwise occupied by the Trust at any time.
- 6.1.2. The Trust is obliged under current regulations to provide a smoke-free environment and will provide support to staff members who wish to stop smoking.
- 6.1.3. It is a criminal offence to smoke in any substantially enclosed area.
- 6.1.4. The Trust or other building controller is obliged to prohibit smoke from entering any part of the premises and therefore smoking in the vicinity of an entrance, window or ventilation system constitutes an offence in accordance with the Health Act 2006.
- 6.1.5. The Secretary of State for Health decreed that all NHS property would be smoke free; this includes all external areas within NHS sites.
- 6.1.6. It is strongly recommended that people who are trying to stop smoking or relieve cravings while on the hospital site use effective evidence-based approaches (this includes gum or patches but not electronic cigarettes).

6.2. Use of e-Cigarettes/ Vaping

- 6.2.1. The Trust recognises that current research indicates that the use of e-cigarettes/vaping aids smoking cessation and is around 95% less harmful than conventional smoking. However, it is critically important that e-cigarette use replaces the smoking culture and does not promote smoking/tobacco use.
- 6.2.2. Patient and visitor use of e-cigarettes is permitted for use on Trust property however such devices must not be used in any building or within 5 meters of any entrance or open window.
- 6.2.3. In order to safeguard patients who are under 18 or pregnant and for the protection of staff and patients the use of e-cigarettes will not be permitted inside any Trust premises.
- 6.2.4. Currently e-cigarettes cannot be prescribed or supplied by staff until they are licensed by the MHRA.
- 6.2.5. Rechargeable e-cigarettes may not be connected to a mains power supply, other than a dedicated USB socket for charging whilst on any Trust site.
- 6.2.6. Guidance on the use of e-cigarettes is provided at Appendix 6. E-cigarettes.

- 6.2.7. Vaping liquids and other equipment or accessories associated with e-cigarette usage remain the responsibility of the patient, they must not be displayed and must be kept secured within the patient locker when not in use.

6.3. Patient Care Impact

- 6.3.1. The Trust fully supports the Making Every Contact Count (MECC) program of behavioural change to promote long term health improvements and minimise risky behaviours. As such all staff with patient contact are expected to utilise and develop existing skills to support patients in actively managing tobacco and nicotine dependency in both short-term visits to the Trust inpatient and outpatient sites and promote long term health goals.
- 6.3.2. At each admission or outpatient contact the smoking status of the patient must be checked and options for support briefly discussed and recorded.
- 6.3.3. Staff supporting patients and families/carers in a community setting must be aware of the risks associated with e-cigarette using and oxygen, see Appendix 7 EIGA Safety Information for more details of the associated risks.
- 6.3.4. Contact details for cessation support can be found at Appendix 8.

6.4. Staff

- 6.4.1. All staff, irrespective of grade or discipline, have a duty to comply with the requirements of this policy by not smoking on any part of the Trust site including building entrances/exits, cars, carparks, pavements, walkways, residences and other grounds of Trust premises, including any external premises at which they are working, based or visiting.
- 6.4.2. Smoking by any member of staff whilst on the Trust site during contractual hours will be treated as misconduct and may lead to formal action in accordance with the Trust Disciplinary Policy and Procedure and/or the Maintaining High Professional Standards policy in the case of medical staff.
- 6.4.3. Staff are not permitted to smoke or use e-cigarettes whilst at work including during official break times within the site smoke free boundaries.
- 6.4.4. Staff are not permitted to take additional smoking breaks or extend other breaks to facilitate smoking activities.
- 6.4.5. Staff who choose to utilise official breaks to smoke or use e-cigarettes will ensure that:
- 6.4.5.1. They are out of uniform/work clothes and,
 - 6.4.5.2. Are not identifiable as Trust Staff whilst smoking and,

6.4.5.3. They move off site beyond the exclusion zone(s) of each Trust site premises.

6.4.6. Smoke free Zones are provided in this document at:

- Appendix 3 RCH Truro Site No Smoking Exclusion Zone
- Appendix 4 St Michael's Hospital Site Smoke Free Zone
- Appendix 5 West Cornwall Hospital Site Smoke Free Zone

6.4.7. All staff, clinical and non-clinical, smelling of smoke or tobacco whilst in the workplace will be considered to have failed to comply with this policy and be potentially subject to disciplinary action.

6.4.8. Staff should be aware that it is a criminal offence to litter public roads and areas. Staff who do so, could be issued with a fixed penalty notice from authorised enforcement officer.

6.4.9. Staff are not permitted to smoke at any time in public when representing the Trust and when attending meetings on behalf of the Trust wherever these are held, including when traveling to or from meeting locations.

6.4.10. Staff are not permitted to assist patients to smoke, must not accompany patients who wish to smoke or ask other members of Trust staff, including members of the Security Team to accompany patients who wish to smoke.

6.4.11. No member of staff is permitted to allow smoking or vaping materials to be visible on site.

6.5. Vehicles

6.5.1. Smoking is not permitted in Trust vehicles at any time.

6.5.2. Smoking is not permitted in leased or staff private vehicles whilst used on Trust business, including the purposes of transporting patients or colleagues.

6.5.3. Furthermore, staff will not be permitted to smoke whilst in their own vehicle on Trust premises including site car parks and roadways.

6.6. Patients, relatives and visitors

All patients, relatives, visitors and carers are required to abide by the Smoke Free Policy whilst on the Trusts premises.

6.7. Trust premises and grounds

The Trust will provide clear signage, in accordance with the Health Act 2006. At all entrances to buildings and around the grounds to ensure that anyone entering the Trust premises understands that smoking is not allowed.

6.8. Sales of tobacco products and smoker's materials

- 6.8.1. It is a criminal offence for anyone to sell, transport or possess illicit tobacco products. Penalties for such offences may include imprisonment and fines of up to £5000 for any manager allowing their premises to be used for such activities.
- 6.8.2. The selling/storing or dealing in anyway of cigarettes or tobacco, by staff, on Trust premises will not be tolerated.
- 6.8.3. The Trust and its officers will fully co-operate with law enforcement agencies, such as HM Revenue and Customs, Trading Standards, etc. in their investigations. Any such activity will be considered as gross misconduct and will result in appropriate disciplinary action.

6.9. Recruitment activity

- 6.9.1. Job advertisements, job descriptions, interviews and induction information will include reference to the Smoke Free Policy and indicate that adherence to it will form part of the contract of employment.
- 6.9.2. All new and existing employees will be able to access this policy from the Trust document library. A copy of this document will also be made available by the appropriate line manager, to all staff who do not readily have access to the Trust intranet site.

6.10. Contractors

Contractors are required to adhere to the terms and conditions of this policy, and all Trust policies and site rules when on RCHT sites. Tenders and contracts with outside organisations will stipulate adherence to this Policy as a contractual condition. Existing contracts will be modified as soon as possible.

6.11. Stop smoking support for staff

- 6.11.1. The Trust recognises its duty towards employees who choose to smoke but will ensure that facilities are reasonably accessible to those who wish to stop smoking.
- 6.11.2. Occupational Health Department will direct staff to support services for employees wishing to stop smoking.
- 6.11.3. In addition, all occupational health nursing and medical staff will undertake, enquiries about smoking status and provide information and advice about stop smoking opportunities with onward referral to the Stop Smoking Service.
- 6.11.4. Stop Smoking support information for staff and patients will be available from the Cornwall and Isles of Scilly stop smoking service who can be contacted on 01209 615600 or via the websites.

6.12. Dealing with non- Compliance

All staff will be expected to reinforce the Trust's Smoke Free Policy in circumstances where they are comfortable to do so.

6.12.1. Patients, visitors and staff from another organisation

- 6.12.1.1. In the event of a breach of the policy by a patient, visitor or a staff member from another organisation, they should be asked to extinguish all smoking materials and be informed of the requirement to leave the site if they wish to smoke. Under no circumstances should a confrontational attitude be adopted or allowed to develop. Staff should walk away if the smoker becomes confrontational. If individuals continue to smoke, the matter should be referred to the Trusts Security Team.
- 6.12.1.2. In the event that staff from other organisations continue to breach the policy, the appropriate organisation should be advised in writing of the requirements of the Trust and the consequences of breaching these requirements.
- 6.12.1.3. All incidents related to smoking on site must be reported through the Trust incident reporting system Datix, as soon as possible following the incident.

6.12.2. Staff

- 6.12.2.1. All Staff are empowered and actively encouraged to enforce this policy on all sites, so far as they feel comfortable in the individual circumstances.
- 6.12.2.2. Any member of Staff who challenges another, regardless of role or grade, in accordance with the requirements of this document in a reasonable and professional manner, will not be subject to any form of management action, detriment or discrimination as a result of the challenge.
- 6.12.2.3. If a member of staff is observed breaching this policy, they must be referred to their line manager for investigation and action as appropriate.
- 6.12.2.4. Any member of staff refusing to observe the policy will be liable to disciplinary action in accordance with the Trust's Disciplinary Policy and Procedure and/or Maintaining High Professional Standards Policy.

6.13. Security Staff

- 6.13.1. The Trust Security Team have an important role to play in enforcing this policy and may be requested to deal with any observed or reported breaches.

6.13.2. If managers or staff feel apprehensive about their own safety in regard to addressing a breach, they should contact the Security Team immediately on Ext 2999 (RCH Site).

6.13.3. It is important to note that primary emphasis should be placed on preventing such situations arising by applying existing training in de-escalation techniques.

6.14. **Support**

All Trust Staff will be fully supported so that they feel able to challenge their colleagues, patients, or other visitors to Trust sites regarding the policy provisions as required and appropriate.

7. Dissemination and Implementation

- 7.1. A copy of the policy will be stored electronically in the Trust's document library on the internet/intranet site.
- 7.2. A clear communication will be sent to managers to make them aware that the revised policy has been issued and that they are responsible for cascading the information to their staff members, including those staff members who do not have regular access to e-mail.
- 7.3. A copy of the policy will be circulated to members of the Occupational Health Department, Stop Smoking Service, HR Practitioner team and Security Manager to enable them to support its implementation.
- 7.4. The Trust's Directors and Chairs of both staff-side committees (JCNC and JLNC) will be advised of the issue of the new policy.
- 7.5. Information to promote awareness of the revised policy will be included in the Trust's electronic information bulletins.

Training

- 7.6. Appropriate training and support will be provided to allow front line staff to provide brief interventions and other advice and support to patients.
- 7.7. Once consultations have been undertaken the final published document will be held centrally within the online Document Library and be available to both staff and members of the public.
- 7.8. Upon publication awareness to all staff will be raised by notification within the Trust's electronic information bulletins and through Health and Safety Committee feedback from both management and staff representation.
- 7.9. Care Group Managers will ensure that the contents of this document are highlighted to staff through regular divisional meetings.

8. Monitoring compliance and effectiveness

Information Category	Detail of process and methodology for monitoring compliance
Element to be monitored	• Prospective employees are advised of the policy. • The policy forms part of the induction program. • Job descriptions and contracts of employment refer to the non-smoking conditions. • There is adequate, clear, signage indicating that all external and internal areas are smoke free. • The number of referrals made to the Stop Smoking service. • The number of breaches dealt with under appropriate policies.
Lead	Nurse Executive
Tool	• Recruitment and selection process and documentation. • Occupational Health and Stop Smoking service statistics. • HR Case Log. • Quarterly site walks.
Frequency	Quarterly
Reporting arrangements	• Health and Safety Committee/JCNC/JNLC. • Whole Hospital Approach to Tobacco Control Group. • Trust Board.
Acting on recommendations and Lead(s)	The Nurse Executive will ensure subsequent recommendations are undertaken including the development of an action plan for any deficiencies within an agreed time frame.
Change in practice and lessons to be shared	• Any system improvements agreed via the action planning process will be actioned in partnership with staff-side within three months. • Lessons will be shared with all the relevant stakeholders. • Any revision to the policy will be communicated to staff.

9. Updating and Review

This Policy will be initially reviewed after a nine-month period following implantation and then reviewed every three years or earlier in view of developments which may include legislative changes, national policy instruction. (NHS) or Department of Health. Trust Board, decision, or requested by either management or Staff side.

10. Equality and Diversity

10.1. This document complies with the Royal Cornwall Hospitals NHS Trust service Equality and Diversity statement which can be found in the ['Equality, Inclusion and Human Rights Policy'](#) or the [Equality and Diversity website](#).

10.2. Equality Impact Assessment

The Initial Equality Impact Assessment Screening Form is at Appendix 2.

UNDER REVIEW

Appendix 1. Governance Information

Information Category	Detailed Information
Document Title:	Smoke Free Policy HSP 023 V4.1
This document replaces (exact title of previous version):	Smoke Free Policy V4.0
Date Issued/Approved:	September 2022
Date Valid From:	December 2022
Date Valid To:	November 2025
Directorate / Department responsible (author/owner):	Gavin Griffiths, Head of Health, Safety, Moving and Handling.
Contact details:	01872 252266
Brief summary of contents:	The policy aims to maintain a smoke-free environment on Trust premises and assist staff, patients and visitors achieve improved health through smoking cessation.
Suggested Keywords:	Smoking, no smoking, tobacco control, smoke-free
Target Audience:	RCHT: Yes CFT: No CIOS ICB: No
Executive Director responsible for Policy:	Deputy Chief Executive and Chief Nursing Officer
Approval route for consultation and ratification:	Executive Members, Trust health and Safety committee, JCNC/JLNC.
General Manager confirming approval processes:	Gavin Griffiths, Head of Health, Safety, Moving and Handling.
Name of Governance Lead confirming approval by specialty and care group management meetings:	Natasha Quick, Service Improvement and Business Lead (Health).
Links to key external standards:	• Health Act 2006 • Health and Safety at Work etc. Act 1974 • NICE Guidance • WHO Guidance electronic cigarettes

Information Category	Detailed Information
Related Documents:	Trust Disciplinary Policy and Procedure.
Training Need Identified?	Yes.
Publication Location (refer to Policy on Policies – Approvals and Ratification):	Internet and Intranet
Document Library Folder/Sub Folder:	Chief Operating Officer / Health and Safety

Version Control Table

Date	Version Number	Summary of Changes	Changes Made by
June 2006	1.0	New Policy	No Smoking Working Party
Nov 2011	2.0	Full review of policy by the Whole Hospital Approach to Tobacco Control Group, JPRG and JCNC (25 Nov 2011)	Helen Strickland HR Business Partner on behalf of the WHATC Group
Jan 2013	2.1	Additional annotations made to the exclusion zone site maps. Confirmation that the use of electronic cigarettes will not be permitted. Policy Change in Section 6.1.2, no smoking during contractual hours	Helen Strickland HR Business Partner on behalf of the WHATC Group
April 2014	2.2	Addition to wording in paragraph 6.1.10 as follows: no staff will be permitted to allow smoking materials to be visible on site	Kevin Wright, Divisional Matron for T and O on behalf of the WHATC Group
April 2016	2.3	Amendment to 6.5.10 No staff member or patient will be permitted to allow smoking Materials or e cigarettes to be visible on the site. Addition 6.5.12 No e-cigarette charging equipment will be allowed on site due to the recognised risk of fire.	Kevin Wright on behalf of the Whole Hospital Approach to Tobacco Control Group
August 2017	2.4	Reinstate smoke-free zone plans appendix 3-5, minor errors corrected to published version	Head of Safety, Fire and Security/Chair Whole Hospital Approach to Tobacco Control Group

Date	Version Number	Summary of Changes	Changes Made by
April 2014	2.2	Addition to wording in paragraph 6.1.10 as follows: no staff will be permitted to allow smoking materials to be visible on site	Kevin Wright, Divisional Matron for T and O on behalf of the WHATC Group
April 2019	3.0	New guidelines re use of e-cigarettes/vaping during staff breaks. Ole and responsibilities of WHATCG to TDAG Updated site plans, removal of extended boundary, minor clarification updates. Change of name of WHATCG to TDAG	Head of Safety, Fire and Security/Chair Whole Hospital Approach to Tobacco Control Group Chair Tobacco Dependency Action Group
May 2022	4.0	Minor amendments to ensure currency of language and references	Rob Harris Senior Safety Adviser
December 2022	4.1	Changes to content to correct language, spelling and grammar.	G Griffiths, Head of Health, Safety, Moving and Handling

All or part of this document can be released under the Freedom of Information Act 2000

This document is to be retained for 10 years from the date of expiry.

This document is only valid on the day of printing

Controlled Document

This document has been created following the Royal Cornwall Hospitals NHS Trust Policy for the Development and Management of Knowledge, Procedural and Web Documents (The Policy on Policies). It should not be altered in any way without the express permission of the author or their Line Manager.

Appendix 2. Equality Impact Assessment

Section 1: Equality Impact Assessment (EIA) Form

The EIA process allows the Trust to identify where a policy or service may have a negative impact on an individual or particular group of people.

For guidance please refer to the Equality Impact Assessment Policy (available from the document library) or contact the Equality, Diversity and Inclusion Team
richt.inclusion@nhs.net

Information Category	Detailed Information
Name of the strategy / policy / proposal / service function to be assessed:	Smoke Free Policy HSP 023 V4.1
Directorate and service area:	Deputy Chief Executive and Chief Nursing Officer
Is this a new or existing Policy?	Existing
Name of individual completing EIA (Should be completed by an individual with a good understanding of the Service/Policy):	Gavin Griffiths, Head of Health, Safety, Moving and Handling.
Contact details:	01872 252144

Information Category	Detailed Information
1. Policy Aim - Who is the Policy aimed at? (The Policy is the Strategy, Policy, Proposal or Service Change to be assessed)	The policy aims to achieve a smoke-free environment for the benefit of all staff, patients and visitors.
2. Policy Objectives	- Promote a healthy working environment and protect the current and future health of staff, patients and visitors. - Provide the right of everyone to breathe air free from tobacco smoke - Comply with Health and Safety legislation and Employment law. - Raise awareness of the dangers associated with exposures to tobacco smoke. - Take account of the needs of those who choose to smoke and support those who wish to stop

Information Category	Detailed Information
3. Policy Intended Outcomes	- A smoke-free environment - Promotion of Stop Smoking advice and support to be available across the Trust.
4. How will you measure each outcome?	- The number of referrals made to the Stop Smoking service. - Statistics on quitters. - The number of breaches dealt with under the appropriate policies.
5. Who is intended to benefit from the policy?	Everyone
6a. Who did you consult with? (Please select Yes or No for each category)	- Workforce: Yes - Patients/ visitors: No - Local groups/ system partners: No - External organisations: No - Other: No
6b. Please list the individuals/groups who have been consulted about this policy.	Please record specific names of individuals/ groups: Trust Board, JCNC/JLNC. Health and Safety Committee.
6c. What was the outcome of the consultation?	Approved
6d. Have you used any of the following to assist your assessment?	National or local statistics, audits, activity reports, process maps, complaints, staff or patient surveys: None

7. The Impact

Following consultation with key groups, has a negative impact been identified for any protected characteristic? Please note that a rationale is required for each one.

Where a negative impact is identified without rationale, the key groups will need to be consulted again.

Protected Characteristic	(Yes or No)	Rationale
Age	No	This Policy does not impact on age.
Sex (male or female)	No	This Policy does not impact on gender.

Protected Characteristic	(Yes or No)	Rationale
Gender reassignment (Transgender, non-binary, gender fluid etc.)	No	This Policy does not impact on gender reassignment.
Race	No	This Policy does not impact on race, ethnic communities or groups.
Disability (e.g. physical or cognitive impairment, mental health, long term conditions etc.)	No	This Policy does not impact on disability.
Religion or belief	No	This Policy does not impact on religion or belief.
Marriage and civil partnership	No	This Policy does not impact on marriage and civil partnership.
Pregnancy and maternity	No	This Policy does not impact on pregnancy and maternity.
Sexual orientation (e.g. gay, straight, bisexual, lesbian etc.)	No	This policy does not impact on sexual orientation.

A robust rationale must be in place for all protected characteristics. If a negative impact has been identified, please complete section 2. If no negative impact has been identified and if this is not a major service change, you can end the assessment here.

I am confident that section 2 of this EIA does not need completing as there are no highlighted risks of negative impact occurring because of this policy.

Name of person confirming result of initial impact assessment:

Gavin Griffiths, Head of Health, Safety, Moving and Handling.

If a negative impact has been identified above OR this is a major service change, you will need to complete section 2 of the EIA form available here:

[Section 2. Full Equality Analysis](#)

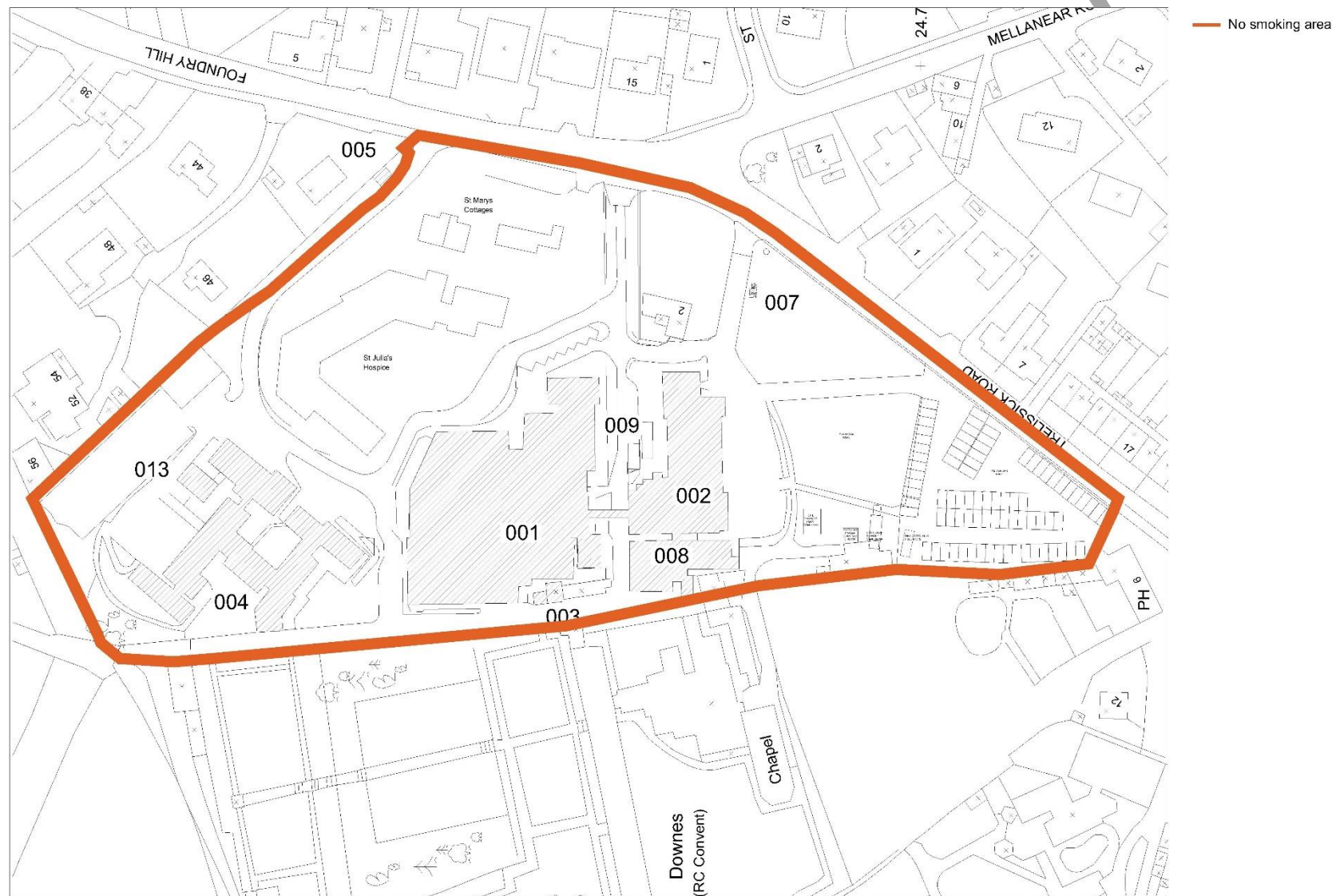
Appendix 3. RCH Truro Site No Smoking Exclusion Zone



The Smoking Exclusion Zone extends to the outside edge of the outer line shown. This area includes:

- Approximately 5 meters either side of the entrance to “old Penventinnie Lane and the “Blue Light”/bus lane entrance from the roundabout
- The area to the private farm lane to the rear of the estates compound
- The lane and adjacent land between the Knowledge Spa and A390

Appendix 4. St Michael's Hospital Site Smoke Free Zone



Appendix 5. West Cornwall Hospital Site Smoke Free Zone

