Greater Glasgow NHS Board

Board Meeting
Tuesday, 22 February 2005

Acting Director of Health Promotion

GREATER GLASGOW NHS NO SMOKING POLICY

Board members are asked to approve the attached draft for consultation with staff and public.

1. INTRODUCTION

At their meeting on 17 February 2004, in considering their response to A Breath of Fresh Air: the Tobacco Control Action Plan, Greater Glasgow NHS Board decided to establish a pan-Glasgow multi-disciplinary working group to develop a new tobacco policy within the framework of making Greater Glasgow NHS (GGNHS) smoke free.

The resultant Working Group comprised representatives from all divisions in GGNHS and included a wide range of roles and disciplines, including Staff Partnership Forum representatives, human resources, health and safety, nursing, pharmacy, mental health, occupational health, primary and acute care, public health and health promotion.

The Group’s report was considered by the Corporate Management Team, who now propose the attached draft policy. Board members are requested to approve this draft as the basis for consultation with staff and public. It is recommended that the consultation take place during the 3 months to 30 May 2005, with a report to the board on the results of the consultation at their meeting scheduled for August 2005.

2. AIMS OF THE POLICY

The draft policy has been designed to support the aspiration within A Breath of Fresh Air: the tobacco control action plan for Scotland that “no Scot should be exposed involuntarily to second-hand smoke at work or anywhere else and for them to choose to reject smoking as being an outdated and unfashionable practice which doesn’t have a place within a healthy forward-looking nation.”

The primary focus of the policy has therefore been to protect staff, visitors and patients from the harmful effects of environmental tobacco smoke (ETS). It also includes support for staff and patients to stop smoking and recognises the contribution the policy can make to smoking prevention and the reduction of smoking rates in the wider community.

3. THE CONTEXT IN WHICH THE POLICY HAS BEEN DEVELOPED

Currently each part of Greater Glasgow NHS has its own smoking policy. In the main these policies are similar and promote a situation where smoking is allowed only in designated smoking areas and smoking rooms (available in some hospitals). However in practice the policies are less well defined - resulting in ambiguity regarding where and when staff and
public can smoke. Over time the reliance on the discretion of local management regarding what is appropriate has resulted in a lack of consistency that undermines the enforcement of the policy. There is a need for a single, unified policy for the whole of NHS Greater Glasgow, which will have the support of staff and public (smokers and non-smokers) and which therefore can be implemented effectively.

The Scottish Executive’s proposed ban on smoking in enclosed public places will provide a strong legislative framework to support the policy. However it will be mid 2006 at the earliest before the ban is in place and the introduction of our own policy in the meantime will ensure that Greater Glasgow NHS is prepared to meet the new legislative requirements.

4. A SUMMARY OF THE KEY PROVISIONS IN THE POLICY

The draft policy prohibits smoking in all GGNHS premises (including buildings, grounds, doorways, car parks and vehicles) i.e. internal patient smoking rooms will be removed.

The only exceptions to this prohibition will be where NHS premises are in effect a patient’s home – i.e. in residential and psychiatric in-patient facilities. In these circumstances patients and visitors can only smoke in designated smoking rooms (not patients’ rooms) and alternative separate non-smoking provision must be made.

In situations where staff provide a community service in a patient’s home, the patient will be asked in advance not to smoke during the visit and to provide an environment that is as smoke free as possible.

Staff will not be permitted to smoke while on duty. Smoking will be permitted only during designated breaks. During the first year of implementation staff will be permitted to smoke in grounds, but thereafter staff wishing to smoke will be required to leave GGNHS premises.

Support to quit smoking will be offered to staff and patients, linking into the extensive smoking cessation services now available through occupational health, LHCCs and community pharmacies. In-patients suffering acute nicotine withdrawal will be treated in a supportive manner and prescribed appropriate medication where required.

5. COMPARISONS WITH OTHER NO SMOKING POLICIES

While the detail of the Scottish ban on smoking in public places has yet to be worked through, it is likely that it will be similar to that operating in the Republic of Ireland.

The GGNHS draft policy meets the requirements of the current Irish smoke free legislation, where exceptions are made for residential and psychiatric hospitals. (Notwithstanding these exemptions the health authorities must still fulfil their duty of care as an employer.)

The proposed policy is also one of the most extensive among those currently existing in health boards in Scotland. NHS Tayside introduced a ‘smoke free’ policy in 2004, which includes the provision of external designated smoking areas and allows smoking by visitors in exceptional circumstances. (This provision has been omitted deliberately from the proposed GGNHS policy as the Group considered this would undermine the message that GGNHS does not condone smoking). NHS Shetland has recently announced their intention to introduce a smoke free policy in hospitals and grounds – but there are significantly more challenging issues of scale and local circumstances facing Greater Glasgow.
The Working Group had recommended that in large hospital sites designated external smoking areas should be provided for use by staff and public. It is considered however that allowing staff to smoke in NHS premises undermines GGNHSB’s duty to display leadership in tackling ill-health caused by tobacco and that the costs associated with smoking shelters for the public could not be justified.

The policy therefore will prohibit NHS staff from smoking on any GGNHS premises, although for the first year of implementation they will be allowed to continue to smoke in grounds. It is hoped that such a stringent policy will encourage many staff to stop smoking and services will be put in place to support those wishing to quit, especially in the first year when working towards a complete ban.

6. POLICY INTO PRACTICE – KEY FACTORS FOR SUCCESS

The recent generally positive response to the Scottish Executive’s decision to introduce a smoking ban in public places suggests that the majority of staff and the public will support the policy. There will however be significant problems, at least in the short term, in introducing more stringent smoking restrictions - for example staff currently experience difficulties when dissuading some patients and visitors from smoking, which in some instances has resulted in verbal and threats of physical abuse. There is also the need to overcome misplaced acceptance by some staff of patients using smoking as a coping mechanism.

The successful implementation of the policy will depend upon unambiguous and visible commitment from the Board, management and staff throughout the whole organisation. This will require:

- Clear communication to managers and staff regarding what is expected of them in supporting the policy
- An agreement that any breaches of the policy must be challenged and staff disciplinary procedures followed through
- Support being provided to staff to help them to dissuade patients and visitors who wish to smoke
- Additional security in key ‘hotspots’ especially during the early stages of implementation.

Successful implementation will also require to be adequately resourced, including:

- The provision of training and information for managers and staff on the policy provisions to support their role in its implementation. Smoking Concerns staff in the Health Promotion Department will develop appropriate materials and deliver training to key staff.

- Training for staff in smoking cessation skills. Smoking Concerns will offer additional sessions of their existing training courses. The work programme for the training officer within Smoking Concerns will give priority to supporting smoking cessation skills training, particularly in the acute sector in preparation for and during the first year of the policy and additional money from the Scottish Executive to support smoking cessation is being used to fund 4 smoking coordinator posts in acute hospitals. Detailed protocols for prescribing NRT have been developed in connection with the pilot smoking cessation service for acute hospital patients, which is currently operating in Southern General Hospital and the service model ensures that patients will continue to receive NRT and support from primary care professionals and/or community pharmacists on their discharge from hospital.
• **Support to staff who want to quit** – Additional resources will be allocated to supporting staff to quit smoking, linking with services in occupational health, LHCCs and community pharmacies.

• **Staff in acute hospitals being able to prescribe appropriate medication, when required, to patients experiencing acute nicotine withdrawal symptoms** – The ability for staff to support such patients is seen as key to gaining staff acceptance of the policy and will reduce any conflict between them supporting the policy and providing patient-centred care.

7. **POLICY CONSULTATION**

Board members are asked to approve the attached draft for consultation with staff and public.

It is acknowledged that it is difficult to achieve the right balance between giving a clear message that Greater Glasgow is anti-smoking, and gaining the support of all – staff and public, smokers and non-smokers, on whose compliance it ultimately relies. The consultation will provide the opportunity to determine whether the draft policy has achieved this.

The consultation therefore will highlight the areas considered by the Group to be most contentious – and specially to seek views regarding these. (The response form is attached as Appendix 1).

It is the intention to consult widely with staff and public using a range of communication channels including Staff News, Health News, Intranet, GGNHS Web-site, staff partnership structures and the involving people networks. The consultation will be carried out during the period March – June. The policy would then be refined in the light of the consultation for final board approval at their meeting in August 2005, with a view to being operational by October 2005.
No Smoking Policy

DRAFT FEB 05

Date Policy Implemented: October 2005

Monitoring Groups:
Health and Safety groups, Risk Management Advisory groups, Scotland’s Health at Work groups, Occupational Health Departments and Human Resources Departments for each division

Reviewed by:
Director of Human Resources
Area Partnership Forum Staff Partners

Review Dates:
October 2006 ☑ October 2008 ☑ October 2010 ☑

Approved for use by:

Bill Goudie
NHS Staff Side Chair of Area Partnership Forum
Date: On behalf of staff-side partners

Tom Divers
Chief Executive
Date: On behalf of management partners
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* To be developed
NHS Greater Glasgow – our smoke-free commitment

1.1 Summary
NHS Greater Glasgow is committed to providing a safe and healthy environment for all staff, patients and visitors. In line with this we have revised our No Smoking Policy to reflect our move towards smoke-free premises:

- Smoking will be banned on all NHS Greater Glasgow property, including buildings, vehicles and grounds.
- The only exceptions to this rule will be in facilities for psychiatric in-patients or for patients in specified residential, long stay accommodation, where the NHS is essentially the patient’s home.
- All staff who smoke will be offered referral to the Occupational Health team for smoking cessation information and support.
- All patients who smoke will be offered access to smoking cessation support and in-patients suffering acute nicotine withdrawal will be treated in a supportive manner and prescribed appropriate medication where required. A clear message will be provided that smoking and the effects of passive smoking are a major cause of preventable ill health and should be discouraged.

1.2 Rationale
Smoking is the biggest single preventable cause of ill health and early death in our community. Smoking causes the premature deaths of 13,000 people in Scotland every year. Most people who die because they smoke will develop one of the three diseases most widely associated with the habit – lung cancer, chronic obstructive lung disease or coronary heart disease. Tobacco smoke contains over 4,000 chemicals in the form of particles and gasses, and about 60 are known or suspected to cause cancer.

Passive or involuntary smoking has been shown to be a hazard to health. Those exposed to passive smoke are at increased risk of lung cancer and heart disease. In addition, passive smoking can trigger or aggravate respiratory conditions such as asthma or bronchitis. It can also irritate eyes, cause coughs and headaches and generally make non-smokers feel ill.

By law (Appendix A) NHS Greater Glasgow is responsible for maintaining a safe, healthy working environment, protecting the health of patients, staff, visitors and contractors from hazardous environments, and making sure that staff understand their responsibilities to take reasonable care of the health and safety of themselves and others.

The 2004 Scottish Executive document *A Breath of Fresh Air for Scotland* challenges the NHS in Scotland ‘to show leadership in the creation of smoke-free environments’. The reorganisation of the NHS in Greater Glasgow in April 2004 has provided the opportunity for a single, unified and explicit commitment to smoke-free premises.
A clear message will be provided that smoking, both active and passive, is a major cause of preventable ill health and should be discouraged. We will highlight the support that the now well-established smoking cessation services can offer to staff or patients who wish to stop smoking.

Health improvement is a key aim of NHS Greater Glasgow and a reduction in smoking prevalence and exposure will contribute greatly to this. A smoke-free environment and the provision of tobacco education and cessation support are recognised methods of achieving this aim, all of which are at the heart of this policy.

1.3 Aim
The aim of this policy is to work towards a tobacco-free environment, for the benefit of all: staff, patients and visitors.

This is fundamental to NHS Greater Glasgow’s desire to be a responsible employer, and to fulfil its health improvement role.

1.4 Key principles
• No patient, visitor or staff member should be exposed to tobacco smoke against their will.
• It is tobacco smoke, and its effects on those who use it and are exposed to it, that is the problem rather than the smokers themselves.
• Smokers who want to stop will be offered smoking cessation support; those suffering from withdrawal will be treated in a supportive way.

1.5 Equal Opportunities
The application of this policy will be monitored by the Director of Human Resources to ensure equitable treatment of all employees irrespective of sex, race, age, disability, sexual orientation, ethnic origin, religion or belief.
Policy in practice

2.1 Scope
Smoking is not allowed on NHS Greater Glasgow premises except in the exceptional circumstances listed below (2.2).

This policy covers all NHS Greater Glasgow premises. These include:
- All buildings e.g. offices, hospitals, health centres, cabins, staff residencies including doorways and main entrances
- All vehicles e.g. pool cars, lease cars (within working hours), vans

The policy applies to:
- All NHS Greater Glasgow employees
- The wider NHS family e.g. contractors, students, voluntary staff, personnel with honorary contracts
- All patients, including out-patients, day-patients, in-patients and long stay patients
- All visitors or other people whose work, study or personal circumstances brings them onto NHS Greater Glasgow premises

2.2 Exceptional circumstances
These exemptions do not constitute a right to smoke – NHS Greater Glasgow is bound by a duty of care to protect its employees.

Residential & psychiatric patients: In facilities for psychiatric in-patients, or for patients in specified residential, long stay accommodation where the NHS is essentially the patient’s home, local NHS Management may find it necessary to designate a smoking room for patients who smoke.

2.3 Policy details
NHS staff & wider NHS family
- Staff must not smoke when on duty, whether on NHS Greater Glasgow property or elsewhere (even if smoking is permitted). This is because they are representing the organisation, and therefore its strategy on tackling smoking, and because it is important not to expose others to passive smoke.
- Staff may smoke only during official breaks outwith NHS Greater Glasgow buildings, and away from all doorways and entrances. Such breaks are always subject to the needs of the Service. As part of a phased approach, it is intended to prohibit staff from smoking anywhere within NHS Greater Glasgow premises (including grounds) from 1st October 2006.
- Staff who smoke in uniform should be aware that this action compromises the health improvement message for NHS Greater Glasgow.
- The policy applies to students and trainees not in our employment who have access to our facilities for training purposes and will be a condition of accepting them as students/trainees.
- Contractors working on NHS Greater Glasgow site are subject to this policy and will be notified of these conditions prior to employment and/or commencement of work.
- Suppliers and deliverers of goods will not smoke on NHS Greater Glasgow premises.
- All job applicants will be issued with a statement about the policy.
- A staff information leaflet will be made available explaining the policy and providing advice on cessation support (Appendix E)
- **Breaches of the policy:** If a member of staff breaches the No Smoking Policy they are liable to be subject to disciplinary action. Line Managers will be made aware of their responsibility and authority in this matter.

**Patients**
- All patients will be advised that they cannot smoke on NHS Greater Glasgow property during their stay.
- Patients suffering severe nicotine withdrawal symptoms will be treated in a supportive manner and prescribed appropriate medication where required.
- Contracted hotels will be expected to provide patients with the choice of a non-smoking room
- To protect staff who visit clients in their own homes, clients and their families will be requested not to smoke for the duration of the visit.
- A patient information leaflet will be made available explaining the policy and providing advice on cessation support (Appendix C)
- **Exceptional circumstances:** In facilities for psychiatric in-patients, or for patients in specified residential, long stay accommodation where the NHS is essentially the patient’s home, local NHS Management may find it necessary to designate a smoking room for patients who smoke. Such rooms will only be provided where space permits, with priority being given to the provision of a non smoking common room. Local protocols for reducing harm to staff and other patients will be developed by managers. These exemptions do not constitute a right to smoke – the NHS is bound by a duty of care to protect its employees.
- **Breaches of the policy:** If a patient repeatedly breaches the No Smoking Policy, they will be dealt with in line with the local divisions’ policies on aggression, harassment or violence because of the danger caused by tobacco smoke to staff & other patients. (Appendix A)

**Visitors**
- Visitors may not smoke in NHS Greater Glasgow buildings. Visitors who smoke can do so outwith the building and away from all doors and entrances.
- Visitor information will be made available to them explaining the policy and providing advice on cessation support (Appendix D)
- **Breaches of the policy:** If a visitor repeatedly breaches the No Smoking Policy, they will be asked to leave the premises.
2.4 Promotion of tobacco
In line with NHS Greater Glasgow’s desire for active discouragement of tobacco use, tobacco products will not be sold, advertised or otherwise promoted on the premises. NHS Greater Glasgow will not hold tobacco-related investments, or accept sponsorship or donations from tobacco companies.

2.5 Implementation, monitoring and review
This policy is intended to benefit all staff and visitors, and so all staff are responsible for its continued implementation.

Main Policy provisions will be clearly displayed at all entrances to all premises. Information on the policy will be made available to all staff and in staff handbooks, during the induction process and on the website.

Overall responsibility for ensuring the policy is implemented, monitored and reviewed (Appendix F) rests with the Director of Human Resources.

Monitoring of adherence to the policy and uptake of smoking cessation services will be carried out by Health & Safety groups, Risk Management Advisory groups, Scotland’s Health at Work groups, Occupational Health Departments and Human Resources Departments for each division. All monitoring information will be reported to the Director of Human Resources as part of the review process.

Please direct any questions or concerns about the policy to the Director of Human Resources.

2.6 Training
All staff will be made aware of their responsibility for complying with and supporting the No Smoking Policy. Managers will be provided with operational guidelines to brief them on the policy enforcement protocol (Appendix B). Training on smoking cessation interventions in order to help patients and colleagues can be accessed by staff as part of their Personal Development Plan (Appendix I).

2.7 Responsibilities
Employee: to comply with the policy as part of the terms & conditions of employment, and to support and enforce it with patients, visitors and colleagues.
Manager/Supervisor: to support any employee who expresses a desire to stop smoking, to ensure that the policy framework is being adhered to in his/her area of responsibility and to handle any breaches in a considered and thoughtful manner.
Human Resources (divisional): to provide support and advice to managers to help them to apply the policy effectively, to monitor policy breaches, and to include a briefing on the policy at staff induction.
Stewards/Representatives – to provide support and advice to their members, ensuring that the policy is used appropriately.
Support for smokers

3.1 Summary
Many smokers want to quit smoking. Patients may use a hospital stay as an opportunity to do so, and employees may use the policy to enhance their motivation to stop. It is equally recognised that many smokers do not wish to stop, and that they must be helped to cope with the restrictions imposed by this policy.

3.2 Support for all

Staff
- Staff who smoke will be encouraged to seek support to quit.
- The local arrangements for accessing such support will be clearly publicised to staff.

Patients
- Wherever possible, patients’ smoking status should be recorded in their case notes on admission, and smokers should be offered information about stopping smoking.
- Coming into hospital presents many patients with an ideal opportunity to stop smoking. NHS Greater Glasgow is committed to providing practical help, support and advice to patients who wish to take advantage of this opportunity. This includes providing information, cessation support and NRT where appropriate.
- Each ward, clinic and department will have access to up-to-date information on the health effects of smoking and cessation techniques.
- In-patients suffering acute nicotine withdrawal will be treated in a supportive manner and prescribed appropriate medication where required.

Visitors
Visitor information will include reference to the policy, emphasising the support that smokers need when they are trying to quit, and discouraging the supply of tobacco products to patients. Visitor leaflets will be included in the information pack sent to patients and supplied on wards.

General
Periodic publicity campaigns will be undertaken (e.g. No Smoking Day) to encourage smokers to attempt to stop, and publicise the support available.

3.3 Sources of help to stop smoking

Occupational health departments
North Glasgow Division:
4th Floor, Cuthbertson Building, Glasgow Royal Infirmary, Castle Street, Glasgow Tel: 0141 211 4709 (Also provides support for Board staff)
Admin Building, Western Infirmary, Dumbarton Road, Glasgow Tel: 0141 211 2058
Treasury Building, Stobhill Hospital, 133 Balornock Road, Glasgow Tel: 0141 201 3467

Yorkhill Division:
10th Floor, Queen Mother’s Hospital, Yorkhill Hospitals, Dalnair Street, Glasgow Tel: 0141 201 0455

Primary Care Division:
William Street Clinic, 120-130 William Street, Glasgow Tel 0141 314 6203

South Glasgow Division:
Residence B, Southern General Hospital, 1345 Govan Rd, Glasgow Tel: 0141 201 2375

**Smoking Concerns**
Eastbank Health Promotion Centre
22 Academy Street
Shettleston
Tel 0141 201 9825
**Web** [www.smokingconcerns.com](http://www.smokingconcerns.com)

**Starting Fresh**
Pharmacy programme
Freephone 0800 389 3210 (9am-9pm)
**Web:** [www.show.scot.nhs.uk/glasgowpharmacy](http://www.show.scot.nhs.uk/glasgowpharmacy)

**Smokeline**
24 hours helpline 0800 84 84 84
Appendix A

Legal obligations
By law NHS Greater Glasgow is responsible for:
- Maintaining a safe, healthy working environment
- Protecting the health of patients, staff, visitors and contractors from hazardous environments
- Making sure that staff understand their responsibilities to take reasonable care of the health and safety of others

Legal instruments:
- Health & Safety at Work Act 1974
- The Workplace (Health, Safety & Welfare) Regulations 1993
- Employment Rights Act 1996
- The Disability Discrimination Act 1995
- Safety & Health of Pregnant Workers (Directive 92/85/EEC)
- Control of Substances Hazardous to Health (COSHH) Regulations 2002.

Cross-referencing:
Local documents:
Primary Care Division:
Occupational Health Referral Process
Resolution of Differences Policy & Procedure
Management of Capability Policy & Procedure
Management of Conduct Policy & Procedure
Equal Opportunities Policy

North Glasgow Division:
Policy and procedure manual on the management of violence and aggression
Dignity at work policy: Bullying and Harassment Procedure
Employee Conduct: Disciplinary Policy and Procedure

South Glasgow Division:
Equal Opportunities
Dealing with Violent Patients

Yorkhill Division:
Dignity at Work Policy
Equal Opportunities Policy
Grievance Procedure
Disciplinary Policy and Procedure
Violence and Aggression Policy

Health Board:
Management of Employee Conduct Policy
Health & Safety Policy
Dignity at Work Policy
Equal Opportunities Policy
NHS/Govt documents:
On the state of public health, Chief Medical Officer’s annual report, 2003
Appendix H

Training available

Helping Smokers Stop in the Workplace
This 1 day training is for anyone who wishes to support colleagues who want to stop smoking in the workplace. Aimed at the lay-person it helps them to signpost co-workers to stop smoking services in their area, and give helpful support.

Smoking Policy – a briefing for managers
This session provides an overview of the new policy and introduces the Operational Guidelines for Managers document – designed to help with troubleshooting and day-to-day issues.

To organise a local training session for 12 or more staff, managers should contact:
Health at Work, NHS Greater Glasgow, 150 Brand Street, Glasgow G51 1DH
Tel: 0141 314 0024
Email: healthatwork@gghb.scot.nhs.uk
Website: www.healthatwork.org.uk

Brief intervention training – on smoking cessation
For GPs, Medical students, Practice nurses
‘Maudsley’ smoking cessation course
Aims to enable those attending to run evidence-based smoking cessation groups. Call to discuss eligibility

General tobacco awareness sessions
Second hand smoke awareness sessions

All available on demand from:
Smoking Concerns, NHS Greater Glasgow, Eastbank Health Promotion Centre, 22 Academy Street, Shettleston, Glasgow G32 9AA
Tel: 0141 201 9825
Email: smokinginfo@gghb.scot.nhs.uk
Website: www.smokingconcerns.com

Group work skills
And other courses available at:
Eastbank Health Promotion Centre, 22 Academy Street, Shettleston, Glasgow G32 9AA
Tel: 0141 201 9800
Email: anne.dunbar@gghb.scot.nhs.uk
Website: www.eastbankhpc.co.uk
No smoking Policy – Consultation Response

1. Introduction

Greater Glasgow NHS Board is aware their success in achieving a smoke free NHS will be dependent, not only upon the formal introduction of a smoke-free policy, but also upon the support of staff, patients and public (both smokers and non-smokers) in complying with and, where necessary, enforcing all elements of the policy. This consultation therefore seeks the views of all who will be affected by and will potentially play a part in enforcing the policy.

1.1 A summary of the key provisions in the policy

The following is a brief summary of the key provisions in the policy. (However, please consider carefully the whole policy document before making your response.)

The draft policy has been designed to support the aspiration within A Breath of Fresh Air: the tobacco control action plan for Scotland that “no Scot should be exposed involuntarily to second-hand smoke at work or anywhere else and for them to choose to reject smoking as being an outdated and unfashionable practice which doesn’t have a place within a healthy forward-looking nation.”

The primary focus of the policy has therefore been to protect staff, visitors and patients from the harmful effects of environmental tobacco smoke (ETS). It also includes support for staff and patients to stop smoking and recognises the contribution the policy can make to smoking prevention and the reduction of smoking rates in the wider community.

- The draft policy prohibits smoking in GGNHS premises (including buildings, grounds, doorways, car parks and vehicles).
- The only exceptions to this prohibition will be where NHS premises are in effect a patient’s home – i.e. in residential and psychiatric in-patient facilities. In these circumstances patients can smoke only in designated smoking rooms where provided (not patients' rooms) and alternative separate non-smoking provision must be made.
- In situations where staff provide a community service in a patient's home, the patient will be asked in advance not to smoke during the visit and to provide an environment that is as smoke free as possible.
- Staff will not be permitted to smoke while on duty. Smoking will be permitted only during designated breaks. During the first year of implementation staff will be permitted to continue to smoke in grounds, thereafter staff wishing to smoke will be required to leave GGNHS premises.
- Support to quit smoking will be offered to staff and patients, linking into the extensive smoking cessation services now available through LHCCs and community pharmacies.
- Patients suffering severe nicotine withdrawal symptoms will be treated in a supportive manner and prescribed appropriate medication if required.
2. Comments re specific provisions of the policy

2.1 Definition of smoke free NHS

The draft policy prohibits smoking in all GGNHS premises (including buildings, grounds, doorways, car parks and vehicles)

This means that internal patient smoking rooms will be removed. This is because evidence shows that even powerful ventilation systems cannot remove the harmful gasses and particles caused by tobacco smoke from the air. The NHS has a duty to protect staff, patients and visitors from being harmed on its premises and this includes addressing the problems of smoke leaking from smoking rooms and also protecting the staff who clean them.

Do you agree with this definition?

YES
NO – it is not sufficiently stringent.
NO – it is too stringent.

Any additional comments

2.2 Restrictions on NHS staff

Staff will not be permitted to smoke while on duty. Smoking will be permitted only during designated breaks. For the first year of implementation staff will be allowed to continue to smoke in grounds, but thereafter staff wishing to smoke will require to leave GGNHS premises.

The definition of NHS premises to include grounds, car parks and vehicles, will impose greater restrictions on staff smoking. The policy seeks to discourage staff from smoking (while off duty) in uniform – but it was not considered feasible to specifically prohibit this practice.

Do you agree with the restrictions on NHS staff smoking?

YES
NO – they are not stringent enough.
NO – they are too stringent

Any additional comments
Staff will not be permitted to assist patients to go outside to smoke

The Working Group took the view that this provision would ensure a consistent approach from all staff, protect individual members of staff from the charge of being unreasonable and protect them from ETS. Patients suffering severe nicotine withdrawal symptoms will be treated in a supportive manner and prescribed appropriate medication if required.

**Do you agree with this provision?**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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</thead>
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**Any additional comments**

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2.3 Exceptions to the policy – psychiatric and residential care

The only exceptions will be where NHS premises are in effect a patient’s home – i.e. in residential and psychiatric in-patient facilities. In these circumstances patients can smoke only in designated smoking rooms where provided (not patients’ rooms) and alternative separate non-smoking provision must be made.

It is anticipated that the Scottish ban on smoking in public places (to be implemented in 2006) will, as in Ireland, make certain premises including psychiatric and residential care facilities exempt. However GGNHSB will still have a duty of care to protect employees in these facilities from the hazards posed by environmental tobacco smoke (ETS). The Working Group therefore decided that patient smoking in these facilities should be restricted to designated smoking rooms (if found to be necessary by local management) and that efforts to increase smoke free areas and reduce smoking activity in these facilities should continue to be supported. Staff in these facilities will be subject to the same restrictions as staff working elsewhere in NHS Greater Glasgow.

**Do you agree with these proposed exceptions?**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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**Any additional comments**
Have you any proposals regarding additional steps to take to protect staff from ETS in these facilities?

2.4 Protecting staff working in the community

In situations where staff provide a community service in a patient’s home, the patient will be asked in advance not to smoke during the visit and to provide an environment that is as smoke free as possible.

The difficulties of enforcing a smoking ban in a patient’s own home are acknowledged, but it is expected that the majority of patients will comply (provided the policy is explained clearly in terms of the legal obligation placed on GGNHSB to protect NHS staff from the hazards of ETS). Standard letters and leaflets will be developed that will ask patients not to smoke during the visit from staff, where possible to refrain from smoking and to ventilate the room (e.g. by opening windows) before the visit.

It was not considered feasible to withdraw services to a patient who does not comply with these requests.

Do you agree with this provision?

YES
NO – it is not stringent enough.
NO – it is too stringent.

Any additional comments
3. **General comments about the policy**

Please use this space to make known any views you may have regarding the aim, rationale or proposed implementation of the policy.

4. **Support required to implement the policy**

Staff, patients and public will need to be clear what is expected of them in implementing the policy. It is acknowledged that an awareness-raising programme among all groups will be necessary, with more in-depth training for some groups (e.g. materials and/or training for managers in implementing the policy, training for some health service staff in smoking cessation skills).

Smoking cessation support will be made available to both staff and patients. Patients suffering severe nicotine withdrawal symptoms will be treated in a supportive manner and prescribed appropriate medication if required.

Please use this space to detail what support mechanisms need to be put in place to ensure the policy can be implemented effectively.