

Human Resources

No Smoking Policy

Policy Manager Director of Facilities	Policy Group No Smoking Steering Group Soft Facilities Policy Working Group
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Policy Established October 2006	Policy Review Period/Expiry 2 Years/ October 2024	Last Updated October 2022
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This policy applies to all parties

UNCONTROLLED WHEN PRINTED

**NHST Non Smoking Policy
Version Control**

Version Number	Purpose/Change	Author	Date
1.0**	Version Control was introduced in July 2011 and the previous versions of this policy, prior to this date, are available in the Electronic Document Store	Paul Ballard	July 2011
2.0	Changes to NHS Guidance	Paul Ballard	April 2013
3.0	To implement the Scottish Government Strategy "Creating a Tobacco Free Generation" ensuring that NHS premises and grounds are totally smoke free by April 2015	Ken Armstrong	March 2015
4.0	To implement the new guidance on e-cigarettes and to anticipate the new measures contained in the new smoking legislation.	Ken Armstrong	April 2016
5.0	To implement the new Health (Tobacco, Nicotine etc. And Care)(Scotland) Act (2016)		February 2019
6.0	To implement the new Prohibition of Smoking Outside Hospital Buildings (Scotland) Regulations 2022	John Paterson	October 2022

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1. INTRODUCTION

Tobacco control is a priority within Scotland and Tayside, as smoking remains the primary preventable cause of ill health and premature death. Smoking continues to have negative impact on the health and wellbeing of individuals, families and communities. On average 15.7% of adults in Tayside smoke (17.5% Scotland) this increases to 30% within areas of highest deprivation (SCOTPHO 2019). The percentage of smokers aged 15 in Tayside (7%) is slightly less than the figure for Scotland but is comparable. The most recent figure (2017 to 2018) at the time of writing, for smoking attributable deaths in Tayside, is 314.2 per 100,000, which is similar to the national rate for Scotland, which is 327.8 per 100,000.

Smoking is one of the main causes of the health inequalities that exist within our communities.

NHS Tayside has a responsibility to work towards national targets for reductions in the prevalence of smoking, exposure to second-hand smoke and the incidence of diseases caused by tobacco smoke.

The Smoking, Heath and Social Care (Scotland) Act 2005 and associated regulations The Prohibition of Smoking in Certain Premises (Scotland) 2006) prohibited smoking in public premises which are wholly or substantially enclosed including vehicles used for business purposes.

Following local consultation and national direction NHS Tayside's Smoking Policy was developed in 2011 to cover not only buildings and vehicles but also NHS Tayside grounds.

National and local publications providing direction and recommendations include:

- A Tobacco Control Strategy for Scotland, Creating a Tobacco-Free Generation (2013)
- The CMO letter 19 Health Promoting Health Service – Action in Hospital Settings (2015)
- Tayside Tobacco Plan (2015 –2018)
- Raising Scotland's Tobacco-free Generation: Our Tobacco-Control Action Plan 2018
- Health (Tobacco, Nicotine etc. And Care)(Scotland) Act 2016
- Prohibition of Smoking Outside Hospital Buildings (Scotland) Regulations 2022

Collectively these publications recognise the need for NHS Boards to:

- Provide smoke-free environments
- Support culture change
- Promote health and person centred care

Recommendations to achieve this include:

- Strong and consistent leadership and management of no smoking policies.
- Staff training in awareness raising, including advice and support on managing nicotine addiction.
- Support and treatment for inpatients to manage nicotine addiction.
- Access to Quit Your Way with our support information for staff, patients and visitors.

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2. PURPOSE AND SCOPE

2.1 Protect and Improve Health

The aim and purpose of this policy is to protect patients, staff and visitors from exposure to second-hand smoke and ensure NHS Tayside buildings and grounds are smoke-free.

It aims to:

- Promote no smoking as normal practice
- Prevent children and adults from seeing smoking within a health promoting organisation
- Raise awareness of Quit Your Way services to help people who want to stop
- Raise awareness of management of nicotine addiction for inpatients
- Promote person centred care
- Clarify roles and responsibilities
- Increase staff awareness and provide guidance on issues surrounding compliance
- Raise awareness of support and training available for staff
- Improve compliance with the policy.

This policy is intended for:

- All directly employed staff of NHS Tayside.
- Patients, including out-patients, day cases, in-patients and long-stay patients
- Visitors
- The wider NHS family i.e. contractors, students, voluntary staff, other healthcare partners and anyone whose work, study or personal circumstances brings them onto NHS Tayside grounds and premises)
- University of Dundee staff who use NHS Tayside premises and grounds

2.2 Legislation

NHS Tayside is required to comply with the smoking provisions of the:

- Smoking, Health and Social Care (Scotland) Act 2005
- The Prohibition of Smoking in Certain Premises (Scotland) Regulations 2006
- Health (Tobacco, Nicotine etc. And Care)(Scotland) Act 2016
- Prohibits smoking in public premises which are wholly or substantially enclosed, in vehicles used for business purposes
- Prohibition of Smoking Outside Hospital Buildings (Scotland) Regulations 2022
- Prohibits smoking within 15m of a hospital building

It is an offence to:

- Smoke indoor public spaces
- Smoke within 15m of a hospital building
- Knowingly permit smoking in no smoking premises or within 15m of a hospital building.

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2.3 Quality Healthcare Services

NHS Tayside aims to provide the highest quality healthcare services. Complaints have been received about people smoking outside NHS Tayside premises and within NHS grounds. This policy aims to improve the environment offered to staff and the public by ensuring smoke-free premises and grounds.

3. IMPLEMENTATION

3.1 Who is the Policy Intended For

NHS Tayside defines smoking as the inhalation of smoke from lit tobacco products such as cigarettes, pipes, cigars.

NHS Tayside defines the use of e-cigarettes as the inhalation of nicotine-containing vapour from a vaping device.

Smoking is not permitted by any persons including staff, patients, visitors and healthcare partners within the premises or on the grounds from which NHS Tayside services are delivered.

Smoking is also not permitted within:

- Public and Contractor Vehicles within the grounds
- NHS Tayside vehicles and pool cars at any time
- Leased cars and personal vehicles when used within working hours and/or when on authorised business

In line with NHS Tayside's aim to actively discourage tobacco use, tobacco products will not be sold, advertised or otherwise promoted on the premises and NHS Tayside will not hold tobacco-related investments or accept sponsorship or donations from tobacco companies.

3.2 Staff and Healthcare Partners

Staff and healthcare partners are not permitted to smoke whilst at work. Staff breaching the policy may be subject to procedures within relevant NHS Tayside Policies and Procedures, and/or the Once for Scotland Conduct Policy.

Staff on authorised unpaid breaks, are not considered to be at work. If staff wish to smoke at this time they:

- Must leave the premises and grounds
- Must comply with 2.1.9 of the NHS Tayside's Uniform, Work wear and Professional Appearance Policy
- Change out of uniform where changing facilities exist
- Where changing facilities don't exist ensure their uniforms and name badge are fully covered by an outdoor coat.
- Will not be allowed longer or more frequent breaks than non-smoking members of staff.
- Any person smoking in uniform or wearing a hospital ID badge may be subject to disciplinary action being taken against them.

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3.3 Exposure of staff to second hand smoke at work – Duty of Care

Corporately NHS Tayside has a duty of care for every staff member and patient with regard to second hand smoke. Staff members have a professional duty of care to their patients and to themselves. This policy reflects these duties of care.

NHS Premises

Where reasonably practical, staff should not normally be exposed to second hand smoke within their working environment. However, if they do, then their time of exposure to second hand smoke should be kept to a minimum.

Staff with pre-existing conditions known to be exacerbated by second hand smoke should not be asked to enter these environments. As far as reasonably practical and considering staff's professional responsibilities toward their patients, staff will be entitled to refuse to be in contact with second hand smoke.

Patients own homes

In order to protect staff visiting patients in their own homes, patients and their families will be requested not to smoke for at least one hour before and during the visit. Where patients and their families ignore such requests, staff will be entitled to discuss alternative care arrangements with their line managers including, when feasible, to visit them at another agreed and smoke free location.

3.4 Support for smokers

The Quit Your Way (QYW) with our support cessation services are provided in NHS Tayside by community pharmacies. This is individual support combined with free treatment for nicotine withdrawal.

Inpatients

Written information on this policy will be provided to all planned care patients before they are admitted to hospital via the appropriate patient admission system.

All patients will be asked as part of their admission procedure about their smoking status. If they smoke, the health professional concerned will carry out a Very Brief Advice (VBA) discussion with the patient that covers the following:

- Smoking is not permitted in the hospital premises or grounds
- They may experience nicotine withdrawal while in hospital as a result of the temporary abstinence
- They will be offered pharmacotherapy which will make them feel more comfortable and make their treatment more effective.
- They should be signposted to QYW services on discharge if they wish to complete treatment to stop smoking
- NHS Tayside staff are not permitted to escort patients from the clinical setting to smoke.
- Ward Managers are responsible for the supervision and safety of patients

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Inpatients that have declined treatment or referral to the QYW service should be reassessed regularly during their stay as some may have reconsidered the QYW option.

NHS Tayside developed Inpatient Nicotine Addiction Replacement Therapy Prescribing Guidance (Appendix 1) plus a Nicotine Addiction In-Patient Pathway (Appendix 2). This provides guidance to clinical staff on managing inpatients that smoke.

Training

Onsite training is available for staff on request contact: 01382424127
tay.smokingcessationservice@nhs.scot

Outpatients and members of the public

Outpatients can be referred to their local community pharmacy who can provide them with information on starting or continuing a smoking cessation program.

National services are available:

Help Line - <https://www.nhs24.scot/our-services/quit-your-way-scotland/>

Information - <https://www.nhsinform.scot/campaigns/quit-your-way-scotland>

Staff

NHS Tayside are committed to supporting staff who want to stop smoking. Staff who do not wish to stop smoke should be encouraged to use Nicotine Replacement Therapy (NRT) products to help them abstain while at work. Staff can access services as detailed above.

3.5 E-Cigarettes

E-cigarettes are nicotine vapour inhaler devices. There remains insufficient evidence on both the safety and efficacy of ENDS as cessation/nicotine maintenance appliances however it is acknowledged that there is a reduced risk to the individual than using tobacco.

NHS Tayside has decided to allow the use of END products on its grounds only as part of a harm reduction approach.

3.6 Sanctions

Smoking in breach of legislation (in enclosed or semi-enclosed spaces or within 15m of a hospital building)

Any person smoking in an enclosed space as defined by the Smoking, Health and Social Care (Scotland) Act 2005 (2) and its associated Regulations are breaking the law and may be liable to a fixed penalty imposed by the external agencies (Local Authority Environmental Health Officers) legally responsible for its implementation.

The Smoking, Health and Social Care (Scotland) Act 2005 (2) allows the agencies charged with enforcing the Act to impose fines on the manager, or any other person in control of any no smoking premises, for allowing others to smoke within them.

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The Prohibition of Smoking Outside Hospital Buildings (Scotland) Regulations 2022 also apply a penalty to people smoking in prohibited areas or knowingly permitting smoking. This applies whether or not the person is aware that smoking has occurred.

It should be noted that corporate management or other senior management staff could face prosecution by the courts because of the actions of others.

Any person smoking within a building or 15m of a hospital building should be:

- Made aware that they are committing an offence and asked to move beyond the 15M boundary.
- Made aware that they are breaching the No Smoking Policy.
- Made aware that they are adding to the risk of fire occurring on-site.

If the person is a member of staff in addition to the points above:

- The line manager of the staff member(if their identity is known), should be informed and the incident investigated with appropriate support/actions taken.

If the person is a patient, in addition to the points above:

- The incident should be relayed to the ward (if an inpatient) or clinic (if outpatient), so that they can reassess the patient using the Management of Nicotine Addiction pathway.
- If patient remains a potential fire risk patients should be encouraged to surrender their smoking paraphernalia.

If the patient is, at the time of inappropriately smoking, unable to recognise their actions as being unlawful or in breach of NHS policy then other means of compliance should be explored at the first opportunity.

If the person is a visitor/relative:

- They should be advised that it is an offence to smoke within the 15M boundary, and reminded of the NHS Tayside No Smoking Policy.
- If the person carries on smoking they should be asked to leave the building in the first instance, and advised that the police will be called.

**Smoking in breach of NHS Tayside policy
(outside entrances/doorways or on hospital grounds)**

Any member of staff found smoking during paid working time or in uniform or wearing a hospital ID badge may be subject to disciplinary action being taken against them. Staff breaching policy may be subject to procedures within NHS Once for Scotland Conduct Policy. Managers are reminded that support for employees to comply with the policy is available and should form part of any agreed action plan.

Where this breach involves a patient, their ward should be informed, where possible, and they should be offered support, NRT product and advice as outlined.

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Use of E-Cigarettes in breach of NHS Tayside policy

All users of E-Cigarettes in breach of the policy, should be advised they are contravening NHS Tayside policy and advised to cease or asked to leave the premises.

Aggression and Violence Management Policy (11)

NHS Tayside takes extremely seriously the health, safety and welfare of all staff, and recognises that violence towards staff is unacceptable and that staff have the right to be able to perform their duties without fear of abuse or violent acts. Staff and managers should follow the guidance in the above policy to prevent and minimize any risk of violence or aggression before approaching anyone who is breaching the No Smoking policy, including the use of ENDS.

All incidents resulting in exposure to violence or aggression should be reported to the appropriate line manager and a Datix incident form completed. Staff should not hesitate to call police if they feel under threat.

3.7 Signage

NHS Tayside will display no smoking signs both internally and externally on all premises, within its grounds and vehicles.

Signs at the entrances to premises will be visible to pedestrians and drivers as they approach the premises.

Signage at the entrance and within buildings will comply with the Smoking, Health and Social Care (Scotland) Act 2005 (2).

4. ROLES AND RESPONSIBILITIES

4.1 NHS Tayside Chief Executive

The Chief Executive is responsible for ensuring that this policy is fully supported by all staff and that there are sufficient resources available to enable its full implementation.

4.2 Site Managers

On each site the Site Managers are required to:

- Ensure that no-smoking signs are prominently displayed
- Ensure the area for which they are responsible is monitored for evidence of smoking, and take appropriate action when evidence is found
- Fully support staff that bring this policy to the attention of any person in breach of it, by reinforcing the no smoking message and by intervening in situations that become difficult for the staff member to manage

4.3 All Managers

Managers are responsible for ensuring that:

- Their staff know about, understand and comply with this policy
- Contractors or non-NHS staff know about, understand and comply with this policy
- The policy is monitored in their own area
- Investigate any policy breaches, taking remedial actions as appropriate

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- Receive and investigate incidents of staff breaching policy in accordance with Once for Scotland Conduct Policy(9)

4.4 All Staff

All staff, whether directly employed or working on a contracted or locum basis must ensure they:

- Are familiar with the policy and comply with its provisions
- Support the policy and follow the guidance in Section 3.6, if they observe anyone smoking in breach of policy or legislation on NHS Tayside premises

4.5 Human Resources

- Provide support and advice to managers to help them to apply the staffing elements of the policy effectively
- To ensure that the No Smoking Policy is featured during staff induction

4.6 NHS Tayside Stop Smoking Support

- Provide cessation advice and support to any patients, staff or visitors who wish to stop smoking and /or reduce their exposure to second hand smoke
- Provide Tobacco Training for NHS staff and partner agencies across Tayside on topics including policy and legislation, risks of smoking and benefits of stopping, support and services available and how to raise the issue of tobacco use.

5. RESOURCE IMPLICATIONS

There will be no financial implications in terms of implementation and enforcement of the policy.

Staff training will be provided via current induction opportunities and in line with PDP needs.

6. COMMUNICATION PLAN

This policy will be communicated in partnership with NHS Tayside Communications Department as a joint partner of the No Smoking Policy steering group.

7. QUALITY IMPROVEMENT – MONITORING AND REVIEW

A monitoring group will oversee implementation of the policy.

Complaints should be raised through:

Tay.smokingcomplaints@nhs.scot

The following indicators will be used to monitor how the policy is being implemented:

- Number of Datix incidents regarding smoking
- Number of complaints regarding smoking through NHS Tayside feedback department
- Number of Patients who access medication in hospital
- Number or % of staff trained in tobacco training

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8. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

This policy meets NHS Tayside EDIA with an updated Equality Impact Assessment attached as appendix 3.

9. SUMMARY OF POLICY

NHS Tayside No Smoking Policy – Key Points

NHS Tayside is committed to promoting healthy living and non-smoking as its normal culture, and being an exemplar in providing smoke free environments. Smoking is not permitted by staff, patients, visitors and healthcare partners in NHS buildings, or anywhere on the grounds including vehicles. E-cigarettes are permitted on NHS grounds but must be 15m away from buildings. Smoking and use of E-Cigarettes are not permitted when transporting other staff or patients within working hours and/or when on authorised business, this includes NHS vehicles, pool or leased cars, and also personal vehicles.

Smoking, health and Social Care (Scotland) Act (2005)

Staff, patients, visitors and healthcare partners smoking within NHS premises are breaking the Law and can be prosecuted.

The Prohibition of Smoking Outside Hospital Buildings (Scotland) Regulations 2022 came into force from 5th September 2022.

Staff members have a responsibility to:

- Uphold the organisation's reputation and lead by example in complying with the policy
- Support other staff members in compliance with policy
- Communicate to staff, patients, and others the increased fire risk from breaching the No Smoking Policy.

Staff are not permitted to smoke whilst at work or during a paid break.

Staff, who wish to smoke, must:

- Do so on an unpaid break
- Do so out with NHS Tayside premises and off the grounds
- Change out of uniform where changing facilities exist
- Where changing facilities don't exist staff must ensure their uniforms and name badge are fully covered by an outdoor coat.

Staff failing to comply with the policy may:

- Be subject to disciplinary proceedings
- Be subject to prosecution if found smoking inside NHS Tayside building

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- Be in receipt of a Fixed Penalty Notice (FPN), if found smoking within 15m of a hospital building as this is a criminal offence and may be reported for action by NHS Tayside to professional registration bodies.

Managers must:

- Ensure they communicate with staff about the policy, any future updates, and the need to comply with its terms.
- Consistently implement the policy at their local level
- Manage and report breaches of the policy

Care of inpatients

Clinical staff must comply with their code of conduct, and have a responsibility to:

- Ask all patients if they smoke on admission
- Inform patients of the organisation's No Smoking Policy
- The impact smoking has on their treatment programme
- Follow the Management of Nicotine Addiction Care Pathway (Appendix 1)
- Deal immediately with patients who are identified as a fire risk through smoking or related paraphernalia
- Protect patients' health and safety, by discouraging them from leaving the clinical area to smoke
- Escalate any concerns to their line manager, medical staff, consultants or senior management
- Should a patient ignore all advice and leave the clinical area to smoke, follow the locally agreed procedure
- Ensure incidents are recorded in the patients notes, and record on Datix where necessary

Support for staff

If you smoke you can receive support and guidance on:

- How to manage nicotine withdrawal symptoms temporarily whilst working
- Personalised, flexible support and treatments available to you if you would like to stop

Quit Your Way with our support service Call 01382 424127, or email

tay.smokingcessationservice@nhs.scot

For local community Quit Your Way cessation service, contact your local community pharmacies in Tayside for a free 12 week quit programme.

National services are available at: <https://www.nhsinform.scot/care-support-and-rights/nhs-services/helplines/quit-your-way-scotland> or phone 0800 84 84 84 (Mon-Fri 8am-10pm, sat-Sun 9am-5pm).

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Risk Management

There is a red risk associated with non-compliance with the policy by visitors, patients and NHS staff but this is managed through ongoing promotion of the Smoke Free site messaging, Posters displayed across the sites, monitoring of complaints associated to smoking being witnessed across the sites and proactive partnership working with Local Authority EHO's.

10. REFERENCES

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7. Tayside Tobacco Plan, (2015 – 2018) http://staffnet.tayside.scot.nhs.uk/NHSTaysideDocs/idcplg?IdcService=GET_FILE&dDocName=PROD_262140&Rendition=web&RevisionSelectionMethod=LatestReleased&noSaveAs=1
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 12. NHS Tayside Infection Prevention and Control Policy. Available at: <http://staffnet.tayside.scot.nhs.uk/safeeffectiveworking/policies/index.htm>
 13. NHS Tayside. Aggression and Violence Management Policy 2017 2018. [Intranet]
 14. Updated Equality Impact Assessment – **Appendix 3**

11. KEY CONTACTS

Head of Operations and Workforce
Public Health
Smoking Cessation
Site Service Managers
Clinical Leads
Local Authority Environmental Health Officers
HR Business Adviser

SECTION 12 – Fairer Scotland Duty Assessment

Each EQIA must have a supporting Fairer Scotland Duty Assessment to declare if the Duty has been applied or not. Please complete either section 12A – ‘Fairer Scotland Duty Assessment not Required Evaluation Tool’ or Section 12B – ‘Fairer Scotland Duty Assessment Applied Evaluation Tool’.

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SECTION 12A – Fairer Scotland Duty Assessment Not Required Evaluation Tool

Title of the programme/ proposal/decision	Reviewed NHS Tayside No Smoking Policy
Programme/ proposal/ decision implementation date	Implementation date of January 2023
Directorate/ Division/ Service/ Team	Facilities and Public Health Directorate NHS Tayside No Smoking Steering Group
Responsible officer for taking decision	John Paterson
Who else was involved in taking the decision	
Was the decision taken by a partnership?	Yes <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> No <input type="checkbox"/>
Rationale for decision	Due consultation was completed at the implementation of the policy with minimal changes being introduced to capture additional legislation. All Stakeholders have been engaged throughout the process to ensure due governance is present.
Declaration: I confirm that the decision not to carry out a Fairer Scotland Duty assessment has been authorised by: Name and Job Title: Louise Fraser – Soft Facilities Manager Date Authorisation given: 09.12.22	

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SECTION 12 B - Fairer Scotland Duty Assessment Applied Evaluation Tool

Section 1 - Planning	Fully Met	Partially Met with Some Areas for Improvement	Not Met	Not Applicable
1. Due regard was paid during the development of the programme/proposal/decision, with a plan developed early to support the Duty assessment.				
2. The aims and expected outcomes of the programme/ proposal/ decision were clearly articulated and confirmed at the planning stage.				
3. Relevant stakeholders were involved in the planning stage.				
4. The appropriate officers across the organisation were made aware that the assessment was underway and that it could have affected the final decision being made.				
Based on your responses to the statements above, please provide evidence/ positive examples.				
Based on the statements above, where could future Duty assessments be strengthened?				

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Section 2 - Evidence	Fully Met	Partially Met with Some Areas for Improvement	Not Met	Not Applicable
1. Evidence was reviewed to identify the programme/ proposal/decision's actual or likely impacts on socio-economic disadvantage and key inequalities of outcome.				
2. Any existing evidence on the effects and effectiveness of the programme/proposal/decision being developed was collated.				
3. EQIA planning work for this issue was reviewed to identify if sex, race, disability or other protected characteristics intersected with socio-economic characteristics and had to be factored into decision making.				
4. Where possible, new evidence was collected for areas that were lacking in evidence to support decision making.				
5. Communities of interest (including those with direct experience of poverty and disadvantage) were engaged with in this process.				
Based on your responses to the statements above, please provide evidence/ positive examples.				
Based on the statements above, where could future Duty assessments be strengthened?				

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Section 3 – Assessment and Improvement	Fully Met	Partially Met with Some Areas for Improvement	Not Met	Not Applicable
1. The assessment took place early enough for any impacts identified to inform the strategic decision being made and appropriate action taken.				
2. The programme/proposal/ decision was assessed to identify how it could be improved so it reduced or further reduced inequalities of outcome, with a particular focus on socio-economic disadvantage.				
3. Senior decision makers were involved in the assessment.				
4. Any adjustments to the programme/proposal/ decision took account of how these could further benefit particular communities of interest or of place, who are more at risk of inequalities of outcome associated with socio-economic disadvantage.				

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Based on your responses to the statements above, please provide evidence/ positive examples.	
Based on the statements above, where could future Duty assessments be strengthened?	

Section 4 – Decision	Fully Met	Partially Met with Some Areas for Improvement	Not Met	Not Applicable
1. As a result of a Duty assessment, any changes required were made to the programme/proposal/ decision.				
2. There is a collective understanding, including at a senior level, of why any changes, if required, were made and what the expected outcomes are.				
3. If no changes were required to the proposal after a Duty assessment, this was clearly understood by all involved in the process.				
Based on your responses to the statements above, please provide evidence/ positive examples.				
Based on the statements above, where could future Duty assessments be strengthened?				

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Section 5 - Publication	Fully Met	Partially Met with Some Areas for Improvement	Not Met	Not Applicable
1. A record of the Duty assessment has been produced, that clearly and accessibly explains the impact of the assessment upon the process.				
2. The Duty assessment has been written up as either an annex to a publication setting out the proposal, or as a Duty assessment document published separately or as a separate section within an EQIA.				
3. The Duty assessment has been signed off by an appropriate officer and published where it can be easily accessed.				
Based on your responses to the statements above, please provide evidence/ positive examples.				
Based on the statements above, where could future Duty assessments be strengthened?				

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Summary Sheet: Outcome of Equality Impact Assessment	
<p style="text-align: center;">Positive Impacts (Note the groups affected)</p>	<p style="text-align: center;">Negative Impacts (Note the groups affected)</p>
<p style="text-align: center;">What if any additional information and evidence is required?</p> <p style="text-align: center;">The No Smoking Policy provides positive health benefit to all communities/groups within Tayside and has no negative effects.</p>	
<p style="text-align: center;">From the outcome of the Equality Impact Assessment what are your recommendations? (refer to section 5 - 12)</p> <p style="text-align: center;">It is recommended that the amended No Smoking Policy is supported for implementation as this provides no detriment to any individual group and promotes healthier living and a healthier environment for all parties accessing NHS Tayside grounds and premises.</p>	

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This summary sheet can be attached to the relevant committee report instead of the fully completed template, but if requested by the Committee or Board the fully completed Equality Impact Assessment should be made available.

MUST BE COMPLETED IN ALL CASES

Manager's Signature

Louise Fraser – Soft Facilities Manager

Date

9th December 2022

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APPENDIX 1: INPATIENT NICOTINE ADDICTION PRESCRIBING GUIDANCE (INCLUDING MENTAL HEALTH & LEARNING DISABILITY)

Tobacco Addiction

(12 week programme)

Prescribing Guidance

(including Mental Health & Learning Disability)



NB: PRESCRIBING GUIDANCE SHOULD BE USED IN CONJUNCTION WITH THE BNF

Hospital Admission

Community Quit

• Aim to provide Very Brief Advice & NRT within 30 minutes of admission (short-term withdrawal management) as appropriate

Primary Care - signpost to community pharmacy

Note:
Nicotine patches are not suitable for patients with general dermatological disorders

If patient has sleep disturbance advise to remove patch before bed

NRT		
If patient smokes 20+ CIGARETTES per day Use combination of Option 1 & 2 (or use Option 1 plus NicotineII Lozenge 1mg oral)		
Option 1	Option 2	Option 3
NicotineII® 21mg/24hr patch (Topical)	Nicorette® 15mg Inhalator (Inhalation)	NicotineII® Lozenge 2mg (Oral)
1 patch daily, apply on waking	Max 6 cartridges/24hrs	8 - 12 usual doses/24hrs (max 15)
Change application site daily	As required	As required
If patient smokes 10 - 20 CIGARETTES per day		
Option 1	Option 2	Option 3
NicotineII® 14 mg/24hr patch (Topical)	Nicorette® 15mg Inhalator (Inhalation)	NicotineII® Lozenge 1mg (Oral)
1 patch daily, apply on waking	Max 6 cartridges/24hrs	8 - 12 usual doses/24hrs (max 15)
Change application site daily	As required	As required
NB: Consider combination of Option 1&2 or 1&3 if patient smokes 15+ a day and within 30 minutes of waking		
If patient smokes LESS THAN 10 CIGARETTES per day		
Option 1	Option 2	Option 3
NicotineII® 7mg/24hr patch (Topical)	Nicorette® 15mg Inhalator (Inhalation)	NicotineII® Lozenge 1mg (Oral)
1 patch daily, apply on waking	Max 6 cartridges/24hrs	8 - 12 usual doses/24hrs (max 15)
Change application site daily	As required	As required

The products of burning tobacco induce liver enzymes (esp. CYP1A2) to metabolise some medicines more quickly. Smokers have increased ability to metabolise the following:-

Benzodiazepines	Caffeine	Chlorpromazine	Cinacalcin	Clozapine	Fluvoxamine (partly)
Haloperidol (partly)	Insulin	Mirtazapine (partly)	Olanzapine (partly)	Paracetamol	Perphenazine
Pranidol	Ropinirole	Tamoxifen	Theophylline	Verapamil	Warfarin (major)

Tricyclics - tertiary (e.g. amitriptyline, clomipramine, desipramine, imipramine)

Stopping/reducing smoking can change the metabolism of the above medication and dosages may need to be reduced. Patients on these medications must be closely monitored when they cease and/or re-commence smoking and other care providers must be informed. **Note—potential for Clozapine toxicity (see risk alert)**

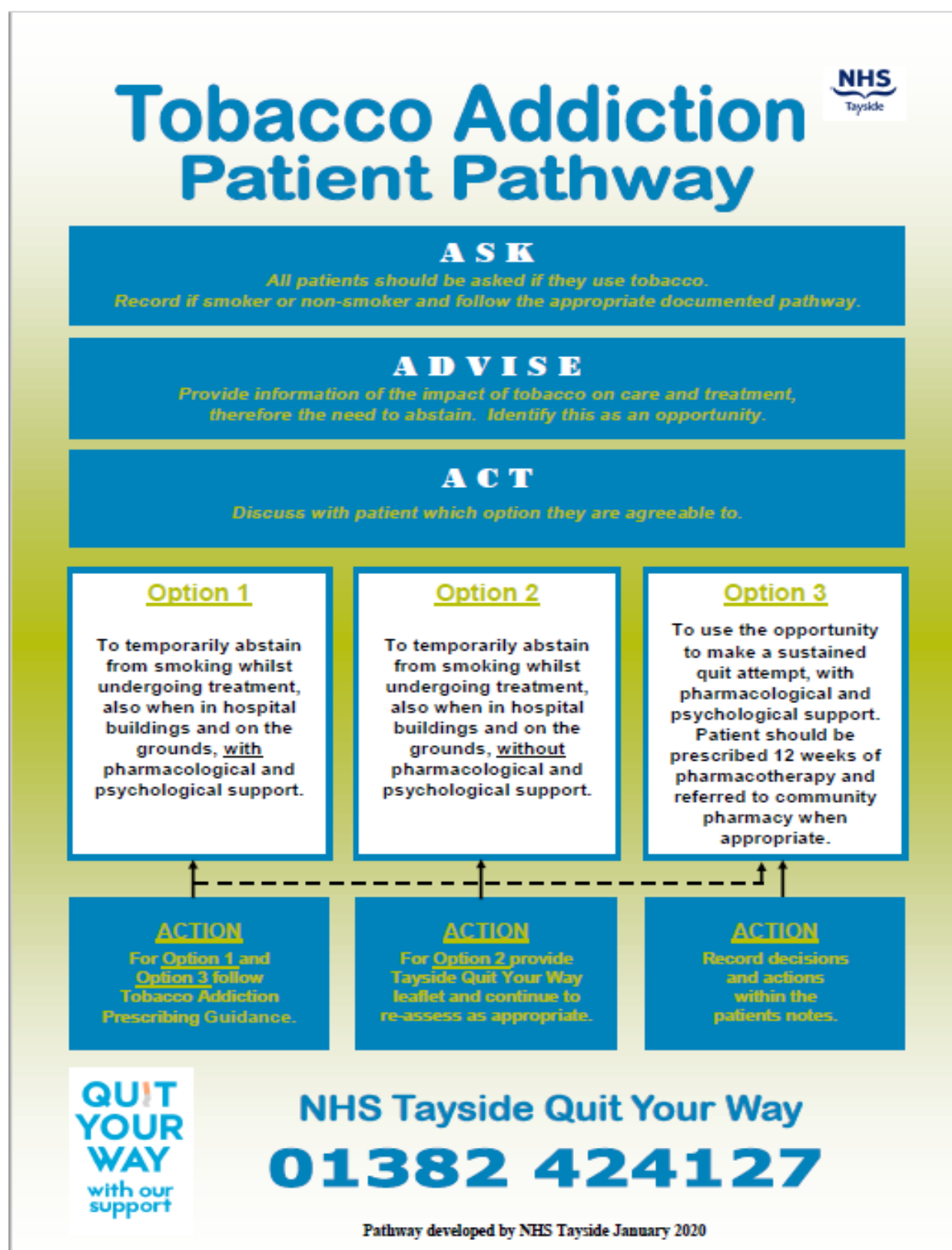
NRT ITSELF HAS NO SIGNIFICANT DRUG-DRUG INTERACTIONS

NHS Tayside Quit Your Way 01382 424127

Prescribing Guidance Developed by NHS Tayside August 2022

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APPENDIX 2: MANAGEMENT OF NICOTINE ADDICTION CARE PATHWAY



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EQUALITY IMPACT ASSESSMENT (EQIA) NHS Tayside No Smoking Policy

Manager John Paterson	Group No Smoking Steering Group
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Established	Last updated 1 st November 2022	Review / Expiry 31 st October 2023
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UNCONTROLLED WHEN PRINTED

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Section 1

Part A – Overview

Name of Policy, Service Improvement, Redesign or Strategy:

Update of NHS Tayside No Smoking Policy

Lead Director or Manager:

Director of Facilities

What are the main aims of the Policy, Service Improvement, Redesign or Strategy?

The policy is designed to contribute to the improvement of the health of the population of Tayside by providing a smoke-free environment while offering support to those who smoke and those who would like to stop.

Description of the Policy, Service Improvement, Redesign or Strategy –

What is it? What does it do? Who does it? And who is it for?

The policy provides advice and guidance for all parties accessing NHS Tayside property and grounds to secure compliance with legislation and NHS Policy in the delivery of a smoke-free zone for all users.

What are the intended outcomes from the proposed Policy, Service Improvement, Redesign or strategy? – What will happen as a result of it? - Who benefits from it and how?

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Continued compliance by NHS Staff, visitors, out-patients to all aspects of the Policy.

Compliance with the Scottish Government Strategy “Creating a Tobacco Free Generation” ensuring that NHS premises and grounds are totally smoke free.

Compliance with Prohibition of Smoking Outside Hospital Buildings (Scotland) Regulations 2022.

Supporting the population of Tayside by providing a smoke-free environment while offering support to those who smoke and those who would like to stop.

Name of the group responsible for assessing or considering the equality impact assessment? This should be the Policy Working Group or the Project team for Service Improvement, Redesign or Strategy.

NHS Tayside No Smoking Steering Group

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Item	Considerations of impact	Outcomes Explain the answer and if applicable detail the Impact	Document any Evidence / Research / Data to support the consideration of impact	Further Actions or improvements required
1.1	<p>Will it impact on the whole population? Yes or No.</p> <p>If yes will it have a differential impact on any of the groups or protected characteristics identified in 1.2. If no go to 1.2 to identify which groups or protected characteristics could be affected.</p>	<p>Yes</p> <p>There will be no differential impact on any group</p>	<p>All documented evidence indicates that no smoking will benefit all sections of society irrespective of race, religion, gender, disability, age, sexual orientation, SIMD's, those in the criminal justice system.</p> <ul style="list-style-type: none"> • Creating a Tobacco free Generation 2013 • NICE Guidance; Smoking Cessation 2012 • Welsh Government Tobacco Action Control Plan 2011 • ASH Scotland: Beyond Smoke Free 2010 • Prohibition of Smoking Outside Hospital Buildings (Scotland) Regulations 2022. 	

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SECTION 1 Part B – Equality and Diversity Impacts

Which equality group or Protected Characteristics do you think will be affected?

Item	Considerations of impact	Outcomes Explain the answer and if applicable detail the Impact	Document any Evidence / Research / Data to support the consideration of impact	Further Actions or improvements required
1.2	Protected characteristics: <ul style="list-style-type: none"> ○ Race - Minority ethnic population (including refugees, asylum seekers & gypsies / travellers) ○ Sex - Women and men ○ Religion/Belief - People in religious / faith groups ○ Disability - Disabled people ○ Age - Older people, children and young people ○ Sexual Orientation – Is 	All these groups will continue to be required not to smoke in NHS buildings and grounds. This will contribute to the improvement of their health. These groups will continue to benefit from the Smoking Policy	See 1	Continued implementation of updated NHS Tayside No Smoking Policy

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	<p>the orientation of persons of the same sex, opposite sex or either sex</p> <ul style="list-style-type: none"> ○ Gender Reassignment ○ Pregnancy/Maternity <p>Other:</p> <ul style="list-style-type: none"> ○ People with mental health problems ○ Homeless people ○ People involved in criminal justice system ○ Staff ○ Socio- economically deprived groups ○ People with mental health problems ○ Homeless people ○ Socioeconomic deprivation groups 			
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	<ul style="list-style-type: none"> ○ Carers ○ Literacy ○ Rural ○ Language / social origins 			
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Item	Considerations of impact	Outcomes Explain the answer and if applicable detail the Impact	Document any Evidence / Research / Data to support the consideration of impact	Further Actions or improvements required
1.3	<p>Will the development of the policy, strategy or service improvement/redesign lead to</p> <ul style="list-style-type: none"> • Direct or Indirect discrimination • Unequal opportunities • Poor relations between equality groups, people with a protected characteristic(s) and other groups • Other 	The Policy will positively impact on the health of all groups		

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SECTION 2 – Human Rights and Health Impact.

Which Human Rights could be affected in relation to article 2, 3, 5, 6, 8, 9 and 11. (ECHR: European Convention on Human Rights)

Item	Considerations of impact	Outcomes Explain the answer and if applicable detail the Impact	Document any Evidence / Research / Data to support the consideration of impact	Further Actions or improvements required
2.1	On Life (Article 2, ECHR) <ul style="list-style-type: none"> Basic necessities such as adequate nutrition, and safe drinking water Suicide Risk to life of / from others Duties to protect life from risks by self / others End of life questions 	The policy will provide smoke free hospital and grounds therefore people will not be subjected to second hand smoke which contains 4,000 toxic chemicals, people have the right to a smoke free stay in hospital with the cleanest of environments to aid recovery	Creating a Tobacco-Free Generation. A Tobacco Control Strategy for Scotland	

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2.2	On Freedom from ill-treatment (Article 3, ECHR) <ul style="list-style-type: none"> ○ Fear, humiliation ○ Intense physical or mental suffering or anguish ○ Prevention of ill-treatment, ○ Investigation of reasonably substantiated allegations of serious ill-treatment ○ Dignified living conditions 	<p>The policy will provide smoke free hospital and grounds therefore people will not be subjected to second hand smoke which contains 4,000 toxic chemicals, people have the right to a smoke free stay in hospital with the cleanest of environments to aid recovery.</p> <p>The policy also supports the provision of pharmaceutical treatment to enable patients to be temporary abstinent while undergoing treatment which can speed recovery and reduce the risk of complications.</p>	<p>Creating a Tobacco-Free Generation.</p> <p>A Tobacco Control Strategy for Scotland</p>	
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Item	Considerations of impact	Outcomes Explain the answer and if applicable detail the Impact	Document any Evidence / Research / Data to support the consideration of impact	Further Actions or improvements required
2.3	On Liberty (Article 5, ECHR) <ul style="list-style-type: none"> o Detention under mental health law o Review of continued justification of detention o Informing reasons for detention 	Not applicable		
2.4	On a Fair Hearing (Article 6, ECHR) <ul style="list-style-type: none"> o Staff disciplinary proceedings o Malpractice o Right to be heard o Procedural fairness o Effective participation in 	The policy provisions apply equally to all staff employed within NHS Tayside		

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	proceedings that determine rights such as employment, damages / compensation			
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Item	Considerations of impact	Outcomes Explain the answer and if applicable detail the Impact	Document any Evidence / Research / Data to support the consideration of impact	Further Actions or improvements required
2.5	On Private and family life (Article 8, ECHR) <ul style="list-style-type: none"> Private and Family life Physical and moral integrity (e.g. freedom from non-consensual treatment, harassment or abuse Personal data, privacy and confidentiality Sexual identity Autonomy and self-determination Relations with family, community Participation in decisions that affect rights 	Not Applicable		

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	<ul style="list-style-type: none"> ○ Legal capacity in decision making supported participation and decision making, accessible information and communication to support decision making ○ Clean and healthy environment 			
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Item	Considerations of impact	Outcomes Explain the answer and if applicable detail the Impact	Document any Evidence / Research /Data to support the consideration of impact	Further Actions or improvements required
2.6	On Freedom of thought, conscience and religion (Article 9, ECHR) <ul style="list-style-type: none"> To express opinions and receive and impart information and ideas without interference 	Not applicable		
2.7	On Freedom of assembly and association (Article 11, ECHR) <ul style="list-style-type: none"> Choosing whether to belong to a trade union 	Not applicable		
2.8	On Marriage and founding a family <ul style="list-style-type: none"> Capacity Age 	Not applicable		

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2.9	Protocol 1 (Article 1, 2, 3 ECHR) <ul style="list-style-type: none"> ○ Peaceful enjoyment of possessions 	Not applicable		
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SECTION 3 – Health Inequalities Impact

Which health and lifestyle changes will be affected?

Item	Considerations of impact	Outcomes Explain the answer and if applicable detail the Impact	Document any Evidence / Research / Data to support the consideration of impact	Further Actions or improvements required
3.1	<p>What impact will the function, policy/strategy or service change have on lifestyles? For example: will the changes affect:</p> <ul style="list-style-type: none"> ○ Diet & nutrition ○ Exercise & physical activity ○ Substance use: tobacco, alcohol or drugs ○ Risk taking behaviours ○ Education & learning or skills ○ Other 	The updated No Smoking Policy will contribute to health improvement of all groups in Tayside by encouraging them to stop smoking.	See 1	See 1.2

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3.2.	<p>Does your function, policy or service change consider the impact on the communities?</p> <p>Things that might be affected include:</p> <ul style="list-style-type: none"> ○ Social status ○ Employment (paid/unpaid) ○ Social/family support ○ Stress ○ Income 	<p>As smoking impacts negatively on all sections of society the No Smoking Policy will thereby benefit all communities.</p> <p>Those stopping smoking will reduce stress, improve income.</p>	See 1	See 1.2
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Item	Considerations of impact	Outcomes Explain the answer and if applicable detail the Impact	Document any Evidence / Research / Data to support the consideration of impact	Further Actions or improvements required
3.3	<p>Will the function, policy or service change have an impact on the physical environment?</p> <p>For example: will there be impacts on:</p> <ul style="list-style-type: none"> Living conditions Working conditions Pollution or climate change Accidental injuries / public safety Transmission of infectious diseases Other 	<p>People who quit smoking as a result of the policy will not smoke at home and therefore, the home environment will improve. Smoking is already banned by law in all internal working environments but its ban in external working environments is also a health benefit. Reduced smoking in all environments will help reduce environmental pollution. Fire can be an associated hazard with smoking - which also reduces through compliance with the policy.</p>		
3.4	<p>Will the function, policy or service change affect access to and experience of services?</p> <p>For example</p>	<p>Smoking cessation services and pharmacotherapy support will continue to be provided by NHS Tayside. Everyone who uses these services will receive support,</p>		

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	<ul style="list-style-type: none"> ○ Healthcare ○ Social services ○ Education ○ Transport ○ Housing 	<p>even if they have quit and feel pressure to start again. Ongoing communication to staff and public re the Smoking Policy will continue.</p>		
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Item	Considerations of impact	Outcomes Explain the answer and if applicable detail the Impact	Document any Evidence / Research / Data to support the consideration of impact	Further Actions or improvements required
3.5	<p>In relation to the protected characteristics and other groups identified:</p> <ul style="list-style-type: none"> • What are the potential impacts on health? • Will the function, policy or service change impact on access to health care? • If yes - in what way? 	<p>Positive Impact on Health</p> <p>Continuation of access to smoking support services</p> <p>Continued provision of expert support to smokers who want to quit.</p>		

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SECTION 4 – Financial Decisions Impact

How will it affect the financial decision or proposal?

Item	Considerations of impact	Outcomes Explain the answer and if applicable detail the Impact	Document any Evidence / Research / Data to support the consideration of impact	Further Actions or improvements required
4.1	<ul style="list-style-type: none"> Is the purpose of the financial decision for service improvement/redesign clearly set out Has the impact of your financial proposals on equality groups been thoroughly considered before any decisions are arrived at 	Not Applicable		
4.2	<ul style="list-style-type: none"> Is there sufficient information to show that 	Not applicable		

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	<p>“due regard” has been paid to the equality duties in the financial decision making</p> <ul style="list-style-type: none"> • Have you identified methods for mitigating or avoiding any adverse impacts on equality group’s • Have those likely to be affected by the financial proposal been consulted and involved 			
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SECTION 5 – Involvement, Engagement and Consultation (IEC)

Item	Considerations of impact	Outcomes Explain the answer and if applicable detail the Impact	Document any Evidence / Research / Data to support the consideration of impact	Further Actions or improvements required
5.	<p>Involvement, Engagement and Consultation (IEC)</p> <p>What existing IEC data do we have?</p> <ul style="list-style-type: none"> Existing IEC sources Original IEC Key learning Have staff Networks been part of the consultation? (where required and not limited to, nor to exclude any other community involvement, 	<p>Original Policy (2006) fulfilled all consultation requirements.</p> <p>Director of Facilities and Public Health Consultant consulted with Staff Focus Group around compliance and support.</p> <p>Updated Policy will go to Soft Facilities Policy Working Group and Facilities Extended Leadership Team for Governance. Update reports are submitted to Performance & Resources Committee on a 6-monthly basis.</p>		<p>As Policy Lead the Director of Facilities will ensure that the updated Policy is processed through relevant review stages.</p>

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	<p>engagement and consultation).</p> <ul style="list-style-type: none"> ○ Do you have lived experiences? <p>What further IEC, if any, do you need to undertake?</p>			
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Section 6 – Have Potential Negative Impacts been Identified?

Item	Considerations of impact	Outcomes Explain the answer and if applicable detail the Impact	Document any Evidence / Research / Data to support the consideration of impact	Further Actions or improvements required
6.	<p>Have any potential negative impacts been identified?</p> <p>If so, what action has been proposed to counteract the negative impacts? (if yes state how)</p> <ul style="list-style-type: none"> • For example: • Is there any unlawful discrimination? • Could any community get an adverse outcome? • Could any group be excluded from the benefits of the function / policy? (consider groups outlined in 1.2) 	No Negative impacts		

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	<ul style="list-style-type: none"> Does it reinforce negative stereotypes? (For example, are any of the groups identified in 1.2 being disadvantaged due to perception rather than factual information?) 			
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Section 7 – Data and Research

7.	<p>Data and Research</p> <p>Is there need to gather further evidence / data?</p> <p>Are there any apparent gaps in knowledge / skills?</p>	No Need to gather further evidence and no gaps in knowledge
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Section 8 – Monitoring Outcomes

8.	<p>Monitoring of Outcome(s)</p> <p>How will the outcome(s) be monitored?</p> <p>Who will monitor?</p> <p>What criteria will you use to measure progress towards the outcome(s)?</p>	<p>Site Management and NHST Public Health Directorate will continue to monitor the Policy.</p> <p>Criteria as set out in the updated Policy.</p>
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Section 9 – Recommendation(s)

9.	<p>Recommendation(s)</p> <p>State the conclusion of the Equality Impact Assessment and any recommendation(s)</p>	<p>Recommended for approval by the Facilities Policy Working Group for onward approval through the Facilities Extended Leadership Team.</p> <p>The updated No Smoking Policy has no adverse effect on any section/community within Tayside and provides a positive health benefit to all groups.</p>
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Section 10 – Progress to Completion

10.	<p>Completed function/policy</p> <p>Who will sign this off?</p> <p>When?</p>	<p>No Smoking Steering Group where Public Health, APF, Clinical and Facilities Management have reviewed the policy.</p> <p>Policy will be signed off by the Facilities Extended Leadership Team(FELT)</p> <p>January 2023</p>
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SECTION 11 – Publication

11.	<p>Publication –</p> <p>Where will it be published and who has responsibility to publish it?</p> <p>Please also provide a copy of the approved EQIA following approval from the appropriate committee. Please email a copy to tay.corporateequalities@nhs.scot and a copy will be uploaded to the Equality and Diversity page on Staffnet and on the NHS Tayside Equality and Diversity public Internet page.</p>	<p>Policy will be published on the NHS Tayside Staffnet pages as well as on the NHS Tayside public website. This will be undertaken by the corporate support team. .</p> <p>Copy will be forwarded once the policy is approved for circulation and implementation</p>
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NHS TAYSIDE – POLICY APPROVAL CHECKLIST

This form must be completed by the Policy Manager and this checklist must be completed and forwarded with the policy to the Executive Team, Clinical Quality Forum or Area Partnership Forum for approval and to the appropriate Committee for adoption.

POLICY AREA: Wellbeing and Public Health
 POLICY TITLE: No Smoking Policy
 POLICY MANAGER: John Paterson -Director of Operations

Why has this policy been developed?	As part of the Legislation changes which came into effect on 5 th Sep 2022 and in line with Health and Safety and Wellbeing Promotion across NHST
Has the policy been developed in accordance with or related to legislation? – Please give details of applicable legislation.	<p>Smoking, Health and Social Care (Scotland) Act 2005. [online]: https://www.legislation.gov.uk/asp/2005/13/contents [Accessed on 17th September 2018]</p> <p>The Prohibition of Smoking in Certain Premises (Scotland) Regulations 2006, (SS101029) R. 3(2). [online] Available at: http://www.legislation.gov.uk/ssi/2006/90/contents/made [Accessed on 17th September 2018]</p> <p>Scottish Government. Creating a Tobacco-Free Generation: A Tobacco Control Strategy for Scotland (2013) [online] Available at: https://www.gov.scot/resource/0041/00417331.pdf [Accessed on 17th September 2018]</p> <p>Scottish Government. Chief Medical Officer, (2015), (19) Health Promoting Health Service: Action in Secondary Care Settings. Available at: https://www.sehd.scot.nhs.uk/mels/CEL2012_01.pdf [Accessed 17th September 2018]</p> <p>The Prohibition of Smoking Outside Hospital Buildings (Scotland) Regulations 2022 available at: https://www.legislation.gov.uk/sdsi/2022</p>
Who has been involved/consulted in the development of the policy?	Public Health, Clinical Specialists, Partnership, Human Resources, Scottish Govt, Local Authorities EHOs

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Has the policy been Equality Impact Assessed in relation to:-		Has the policy been Equality Impact Assessed not to disadvantage the following groups:-	
Age Disability Gender Reassignment Pregnancy/Maternity Race/Ethnicity Religion/Belief Sex (men and women) Sexual Orientation	Please indicate Yes/No for the following: Yes Yes Yes Yes Yes Yes Yes Yes	People with Mental Health Problems Homeless People People involved in the Criminal Justice System Staff Socio Economic Deprivation Groups Carers Literacy Rural Language/Social Origins	Please indicate Yes/No for the following: Yes Yes Yes Yes Yes Yes Yes Yes Yes
Does the policy contain evidence of the Equality Impact Assessment Process?		Yes	
Has the policy been assessed against the Fairer Scotland Duty?		N/A	
Does the Fairer Scotland Duty apply?		N/A	
Has the policy been impact assessed in relation to the organisations commitment to Sustainability? Yes			
Goods and Services – Introduction or expansion of use of single use products? Travel – increased emissions? Energy – increased emissions? Waste – increased waste? Pharmaceuticals – increased waste pharmaceuticals?		Please indicate Yes/No for the following: No No No No No	
Please detail mitigations is answered yes to any of the above			
Is there an implementation plan?		Yes	
Which officers are responsible for implementation?		All Managers and Staff have responsibility for implementation of the policy	
When will the policy take effect?		5 th Sept 2022	
Who must comply with the policy/strategy?		All Users accessing NHST Hospital sites	
How will they be informed of their responsibilities?		Signage is in place across all sites with guidance and training delivered locally to all staff from line managers	
Is any training required?		N/A	
If yes, attach a training plan		N/A	
Are there any cost implications?		Additional signage supplied by Scott Govt is in place – not further costs identified.	
If yes, please detail costs and note source of funding			
Who is responsible for auditing the implementation of the policy?		Facilities Directorate	
What is the audit interval?		Quarterly meetings of a SLWG to support effective application of the policy	

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Who will receive the audit reports?	Soft Facilities Manager, EHOs, Public Health and Partnership colleagues
When will the policy be reviewed and provide details of policy review period (up to 5 years)	5 th September 2023 and then biannually

POLICY MANAGER: _John Paterson DATE: __28.02.23__

APPROVAL COMMITTEE/GROUP TO CONFIRM: No Smoking Steering Group

ASSURANCE REPORTING TO STANDING COMMITTEE: Performance and Resource Committee

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Appendix 5

NHS Tayside No Smoking Policy 2023 – Guidance for Staff

NHS Tayside operates a strict No Smoking Policy within all of its premises and grounds.

New legislation by the Scottish Government came into force on 5 September 2022, making it an offence to smoke within 15 metres of any hospital building. This means that anyone smoking within 15 metres of a hospital can face a fixed penalty notice of £50 or a fine of up to £1000 if taken to court.

The new law supports NHS Tayside's existing No Smoking Policy, a policy which is in line with all Health Board sites across Scotland.

NHS Tayside has a duty of care to every person accessing their sites, which ensures that all reasonable steps are being taken to mitigate the risk of secondary smoke being inhaled by passers by, as well as supporting staff in compliance with NHS Tayside's No Smoking Policy.

Frequently Asked Questions:

Q1: What is included in the No Smoking Policy for NHS Tayside?

NHS Tayside operates a strict no smoking policy within all of its premises and grounds covering:

- All buildings e.g offices, hospitals, health centres, cabins and staff residencies including communal areas.
- All vehicles, e.g pool cars, lease and privately-owned cars, light and heavy goods vehicles.
- All grounds, e.g gardens, walkway, car parks, staff residential communal areas.

Q2: Who does the No Smoking Policy apply to?

All NHS Tayside staff, patients, visitors and contractors

Q3: Why has NHS Tayside's No Smoking Policy been revised?

NHS Tayside's No Smoking Policy has been revised to include smoking legislation changes which came into force on 5 September 2022, making it an offence to smoke within 15 metres of any hospital building. NHS Tayside No Smoking Policy has been updated to reflect this change and to support staff to comply with the recent changes.

NHS Tayside is a health promoting organisation and we are committed to protecting and improving the health and wellbeing of all employees, patients, visitors and contractors. Allowing smoking anywhere on our sites is not consistent with this commitment.

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Q4: What are the key updates to NHS Tayside's revised No Smoking Policy?

- All NHS Tayside premises and grounds remain smoke free
- The change in the legislation now means it is also an offence to smoke within 15 metres of any hospital building. This means that anyone smoking within 15 metres of a hospital can face a fixed penalty notice of £50 or a fine of up to £1000 if taken to court.
- The no smoking legislation is enforced by Local Authority Environmental Health Officers.

Q5: What do we mean by smoke free?

Smoke free means not smoking anywhere on the premises, be that inside the buildings or in the grounds.

Staff may not smoke when on duty whether on NHS Tayside property or grounds or elsewhere.

Staff may only smoke during official unpaid breaks, outwith NHS Tayside premises and grounds and when they are not identifiable as NHS Tayside employees, ie. when wearing uniforms.

Q6: How do we make people aware of the No Smoking Policy?

NHS Tayside's No Smoking Policy is in place to protect and improve the health and wellbeing of the people using our services.

We are working positively with people visiting and working in our hospital sites to ensure that our No Smoking Policy is followed. This includes:

- Signage around all sites informing patients, visitors and staff that NHS Tayside grounds are smoke free areas.
- New No Smoking signage relating to the new legislation has been installed at all entrances to NHS Tayside grounds and new No Smoking posters are displayed across NHS Tayside sites.
- Information about the No Smoking Policy is included in patient appointment and admission letters.
- Guidance on the No Smoking Policy is regularly shared with staff, patients and visitors through internal and external communications.
- New staff are also informed about the No Smoking Policy at their induction sessions.
- NHS Tayside No Smoking Steering Group has developed a Toolbox Talk which provides information about how staff can support patients to refrain from smoking while in hospital. This is available to all managers through the Smoking Cessation and Public Health team.

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- NHS Tayside No Smoking Steering Group is working in partnership with the Learning and Development Team to develop a LearnPro module for staff which aims to raise awareness and compliance of the No Smoking Policy. Information on how to access this will be shared with staff as soon as possible.

Q7: Who is responsible for enforcing the NHS Tayside No Smoking Policy, and the Scottish Government smoking legislation?

- All staff have a responsibility to remain compliant with NHS Tayside's No Smoking Policy. Staff failing to comply with NHS Tayside policy may be subject to disciplinary proceedings.
- Local Authorities (Dundee City Council, Angus Council and Perth and Kinross Council) are responsible for the legal enforcement of the No Smoking legislation on hospital sites.
- NHS Tayside has a responsibility to ensure that all reasonable steps are being taken to educate/inform all users of our sites that NHS grounds are smoke free and that it is an offence to smoke within 15 metres of any NHS hospital building.

Q8: Are there any exemptions to the No Smoking Policy?

Scottish Govt have supported Mental Health Facilities (Psychiatric units), who have outside smoking areas within the 15 metre perimeter for the use of inpatients, one year to remove these. This would be one year from when the regulation was implemented in September 2022.

NHST removed all smoking areas from all sites some years ago, therefore no exemptions to the No Smoking Policy for NHST are present.

Q9: Can you smoke in your car within NHS grounds?

All sites and grounds are smoke free and therefore smoking in cars within the grounds is not permitted.

Q10: Why can't smoking shelters be provided?

All NHS sites are completely smoke free. We want to protect the health of all our staff, patients and their visitors and, as such, it is simply not appropriate to have smoking shelters.

Q11: Do staff and patients have a right to smoke?

Stopping smoking is one of the most beneficial things that you can do for your health. We ask that everybody recognises our wish to promote the health of the people who utilise our services and work for us. The No Smoking Policy governs the conduct of staff with respect to smoking.

Q12: What support is available for patients who smoke?

Staff should not escort patients who want to leave a ward to smoke within NHS grounds.

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Support will be provided for patients who smoke when admitted to hospital.

- Patients should discuss their elective admission to hospital and how to prepare for it with their referring GP.
- Patients should be advised of the NHS Tayside No Smoking Policy before admission via their admission and appointment letters. Patients attending the pre-admission clinic will also be advised about preparing for admission.
- Patients can visit their pharmacist to discuss how to manage their admission or how to attempt to quit. Once admitted to hospital, patients who smoke will be offered support to treat tobacco addiction to assist in the management of withdrawal symptoms, making the patient's hospital stay more comfortable.
- Guidance for staff in treating tobacco addiction can be found in the [Tobacco Addiction Patient Pathway](#) and [Prescribing Guidance](#) on the Formulary on Staffnet (Search for smoking). See Appendix 1 for information regarding NRT and tips for stopping smoking that can be shared with patients.
- For advice or to arrange training regarding the Tobacco Addiction Patient Pathway and Prescribing Guidance, contact the Tobacco Team in Public Health on 01382 424127 (Ext 71127) or email TAY.smokingcessationservice@nhs.scot

Q13: Can e-cigarettes be used on NHS grounds?

E- Cigarettes can be used withing NHS grounds but not within NHS Buildings. New Legislation of the 15 mtr boundary, also appliles to the use of e-cigarettes.

Q14: Can staff members smoke in their uniform?

No. Staff may only smoke during official unpaid breaks, out with NHS Tayside premises and grounds and when they are not identifiable as NHS Tayside employees. Therefore, smoking in uniform/working clothes is not permitted.

Q15: I don't work on a hospital site – does the smoking ban on NHS Tayside grounds apply to me?

Yes. The smoking policy applies to all NHS staff and contractors during their working hours, whether they work on a hospital site or not.

Q16: What support is available for staff who smoke?

- Staff who want to stop smoking can receive support from their community pharmacist where they can receive free behavioural support and treatment. Appendix 1 contains information regarding Nicotine Replacement Therapy (NRT) and tips for stopping smoking.
- Staff who do not wish to stop smoking and need help to manage cravings, can do so with NRT products. See appendix 1 for NRT product information.

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- If staff wish to seek further advice, they can contact the Quit Your Way team in Public Health on 01382 424127 (Ext 71127) or email TAY.smokingcessationservice@nhs.scot

Q17: As a staff member, can I take a break to leave the site and have a cigarette if I make sure I work the time back?

No, members of staff are not entitled to cigarette breaks. Members of staff can smoke during their normal unpaid breaks, i.e lunchtime, if they go off site and are not identifiable as NHS Tayside employees. However, they are not permitted to use their working time in this way.

Q18: What will happen if staff continue to smoke on NHS Tayside grounds?

Any member of staff who breaches the NHS Tayside smoking policy will be managed in line with current NHS Tayside procedures for managing staff conduct.

Any member of staff who breaches the No Smoking legislation, which makes it an offence to smoke within 15 metres of any hospital building, can face a fixed penalty notice of £50 or a fine of up to £1000 if taken to court. The legislation is enforced by Local Authority Environmental Health Officers.

Q19: How will the No Smoking Policy be implemented?

Everyone shares the responsibility for adhering to and implementing the NHS Tayside No Smoking Policy. It aims to maintain a safe, healthy working environment and improve the health of the population of Tayside by providing smoke-free sites, while offering support to those who smoke and those who would like to stop.

In NHS Tayside there are several measures in place to ensure the No Smoking Policy is followed which includes the use of clear signage around all sites informing patients, visitors and staff that NHS Tayside grounds are smoke-free areas and a pre-recorded loud speaker message is played to reinforce this at Ninewells Hospital. Regular Site Walks for spot checks are also in place to reinforce support for all parties in adherence to the Smoke Free Grounds and compliance with legislation.

NHST are actively engaging with Local Authorities to highlight Hot Spots across their sites, with Environmental Health Officers attending site at regular intervals to support compliance with legislation.

No Smoking Policy will be included on the NHS Tayside Staffnet site.

All staff and managers have a responsibility to support the implementation of the No Smoking Policy.

Managers are also reminded to ensure staff are aware of NHS Tayside's No Smoking Policy, including the national no smoking legislation on hospital sites, and abide by it. They should also be aware of smoking cessation services and support available to NHS staff and patients, including the availability of Nicotine Replacement Therapy.

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As a health promoting organisation, NHS Tayside will regularly communicate reminders of the smoking policy to patients, staff and visitors through both internal and external communications.

Q20: What should I do if I find someone smoking within NHS Tayside sites?

If a member of staff feels comfortable speaking to patients or visitors who are smoking, the suggested approach, if they feel safe to do so, is state that the grounds of all hospitals in Scotland are smoke free, however you can smoke off the hospital grounds, and then walk away.

If you see another member of staff smoking you can either signpost them to the Quit Your Way service or ask them to discuss support with their line manager.

People can now also email the dedicated smoking complaint email address Tay.Smokingcomplaints@nhs.scot to report instances of smoking which have been witnessed either within NHS Tayside grounds or within the 15 metre legislation perimeter. This email box will be monitored by site managers across NHS Tayside for further action.

Q20: Is there any training available to support staff who feel uncomfortable challenging patients or visitors?

Yes, training is available for all staff in engaging in challenging conversations, available through Learning and Development.

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