# SMOKEFREE PROCEDURE

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## PROCEDURE SUMMARY

Essex Partnership University NHS Trust (EPUT) is committed to providing a healthy and safe environment for all patients, residents, employees, visitors and contractors. In accordance with its legal obligations under the Health and Safety at Work Act 1974, The Health Act 2006, and accompanying regulations, NICE Quality Standard [QS82] March 2015 and the increasing evidence of ill-health, cancer and respiratory infections in those who share an environment with active smokers, the Trust has endorsed the following procedure to promote good health for its staff, users of its services, contractors and visitors to our sites.

Patient’ will be the terminology used throughout this document and will refer to a patient, resident or service user.

The **Trust monitors the implementation of and compliance with this procedure in the following ways:**

Managers will take reasonable steps to ensure that adequate arrangements are in place to enable the smokefree procedure to be fully implemented at ward, department and clinic level, ensuring that all staff, service users and visitors comply with the procedure. All employees have a duty to comply with the requirements of this procedure. An initial review of the implementation of this procedure will be completed in the next 12 months then after every 3 years.

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The Director responsible for monitoring and reviewing this procedure is the Executive Nurse.
SMOKEFREE PROCEDURE

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1.0 INTRODUCTION

1.1 Essex Partnership University NHS Foundation Trust (EPUT) has a duty of care to protect the health of, and promote healthy behaviour among people who use or work in their services. “Stopping smoking at any time has considerable health benefits and for people using secondary care service, there are additional advantages including shorter hospital stays and fewer complications (NICE Guidelines [PH48] November 2013) (NICE Quality Standard [QS82] March 2015).”

1.2 This procedure has been developed to protect all employees, patients, visitors and contractors from exposure to second hand smoke and to assist compliance with the Health Act 2006.

1.3 Smoking is not permitted on any part of the Trust site including buildings, entrance/exits, car parks, pavements/walkways and residences.

1.4 Staff, visitors and patients who wish to stop smoking will be offered support.

1.5 Ethical and Legal Considerations:
Restricting smoking to provide a smoke free environment does not infringe human rights. This argument has been legally tested and was upheld by the Court of Appeal in 2008 after Rampton Hospital in Nottinghamshire became smoke free. It ruled that a hospital is not the same as a home environment and is instead a place that should support the promotion of health and wellbeing. The judgement said: “There is, in our view, powerful evidence that, in the interests of public health, strict limitations upon smoking, and a complete ban in appropriate circumstances, are justified.”

2.0 DEFINITIONS

2.1 Smoking is the inhalation of the smoke of burning tobacco or any other substance encased in cigarettes, pipes, includes all tobacco, non-tobacco substances and cigars.

2.2 Where this procedure relates to ‘staff’ this includes locum, bank, agency, trainees, volunteers and seconded staff on either temporary or permanent contracts.

2.3 ‘Patient’ will be the terminology used throughout this document and will refer to a patient, resident, client or service user.

3.0 EMPLOYEES AND CONTRACTORS

3.1 All members of staff have a role to play in implementing and complying with this policy and are expected to be familiar with its content.
3.2 If any staff or a contractor is found smoking on Trust premises the incident must be reported using the Datix reporting system.

3.3 Managers have a duty to ensure this policy is enforced within their area of management responsibility. This includes making employees aware of this policy and appropriately dealing with employees who are in breach of this policy:

- Job advertisements will include reference to the Smokefree policy and indicate that the adherence will be contractual.
- Staff who work for the Trust will be subject to disciplinary proceedings.
- Staff who have agreed under contractual arrangements to not smoke on Trust premises will be dealt with by the manager of the area.

3.4 The Trust is trying to create an environment in which people are encouraged to make healthier choices therefore staff are encouraged to consider stopping smoking. Information on the Stop Smoking services is available from Trust intranet in Engagement, Staff Health and Well-being link. Or call the NHS Smoking Helpline on 0300 123 1044. Free literature on Smokefree is available on www.orderline.ch.gov.uk or ring 0300 123 1002 and place a free order.

3.5 The Trust Occupational Health will provide advice and support for staff wishing to stop smoking. Staff may contact Optima Occupational Health on telephone number 0345 643 4368 or by email angsa.occupationalhealth@nhs.net.

3.6 Smoking cessation support will be offered to all staff by local Smoking Cessation Services. Information on how to find your local smoking cessation service will be available on the Trust Health and Wellbeing link. Alternatively visit https://www.nhs.uk/smokefree or call the NHS Smoking Helpline on 0300 123 1044. Staff can also text ‘GIVE UP’ and full postcode to 88088 to find local Stop Smoking Service.

3.7 The Trust also provides online (OLM) training for staff on very brief advice on smoking. This will enable staff to discuss smoking behaviours with their patients.

3.8 All job advertisements will include reference to the Smokefree Policy and will state that adherence will be contractual.

3.9 Staff must avoid condoning or advocating the use of tobacco smoking or e-cigarette use and promote a smoke free environment and healthy living.

3.10 Smoking Breaks – It is unlawful to smoke at work. Staff or contractors wishing to smoke can only do so off-site and during designated unpaid breaks. Staff are not entitled to any additional smoking breaks over and above their entitlement under the European Working Time Directive.

3.11 Staff must never smoke in public areas while displaying or showing Trust uniform or displaying their Trust/name badges. Staff must set a good example to the public by promoting a smoke free environment and healthy living lifestyle.
3.12 Furthermore staff have a responsibility to avoid smoking in public areas immediately outside of their place of work, for example, near hospital/unit entrances/exits, etc.

3.13 Staff who smoke must do all they can to minimise the smell of smoke whilst on duty. Managers will need to monitor staff approach to this.

4.0 INPATIENT SETTINGS

4.1 To protect staff, patients, visitors and contractors from the harmful effects of passive smoke, the Trust does not provide smoking facilities anywhere on Trust premises.

4.2 All patients are to be assessed and offered smoking cessation support on admission to an in-patient unit and this must be clearly documented in the patient’s record. Assessment of smoking status documented. (See Appendix 1 - the Flow Chart for this procedure for details).

4.3 This includes offering very brief advice on smoking cessation will be offered using the “Ask, Advice, Act” protocol, and documenting the support that is made available for them to stop, in the care plan with a review date.

4.4 Staff will need to be sensitive when approaching the topic of smoking cessation especially when a patient has just been admitted to hospital or is experiencing a significant crisis.

4.5 Nicotine replacement therapy (NRT) will be offered by the Trust to all patients who are in-patients. The prescribing guidance for NRT is set out in Section 17 of the Formulary and Prescribing Guidelines: access is via the Medicines Management pages of the intranet.

4.6 Community Health Services must comply with the Clinical Commissioning Group (CCG) prescribing formulary. Changes in smoking behaviour must be documented and the necessity to adjust other drugs must be considered.

4.7 Ensure patients are supplied with an adequate amount of NRT during periods of leave and on discharge

4.8 Staff will ensure that patients are provided with advice and support to actively manage stress and nicotine withdrawal. All staff must also utilise a diversional approach i.e. one to one or group activities in managing patients who are stressed and experiencing nicotine withdrawal.

4.9 At all times, cigarettes/tobacco and lighters/matches are not permitted on the ward/unit. Arrangements can be made for these items to be returned to carers or family or kept in a secure safe, only to be given back when the patient is unescorted or discharged.
4.10 Staff are not permitted to buy cigarettes for patients, hold lighters/matches for patients or escort patients out to smoke.

4.11 Encouragement and support to cease smoking will form part of the clinical management plan for all patients who smoke. Patients where applicable will be offered nicotine replacement as described in the [EPUT Formulary and Prescribing Guidelines](#). This must be recorded in the patient’s care record. For details of products that are available to be prescribed, staff must refer to the Trust lead pharmacy department for relevant advice.

4.12 Smokefree literature will be available for patients. (Staff can order free literature from Telephone: 0300 123 1002 or seek advice from local Smoking Cessation Services.)

4.13 If patients are known to be smoking on the ward, staff should approach and politely ask them to stop smoking and remind them of the smokefree policy and procedure. The least restrictive approach to care should be employed unless they pose a risk of fire or their presentation escalates to the extent of potential harm to others or themselves. This must be reported using the Datix system.

4.14 In some instances individuals may become distressed and/or disturbed because of the inability to smoke. Staff are advised that if they are placed in any danger, they must refer to and use the Trust Zero Tolerance policy ensuring assessment of a patient’s physical health and mental health is reviewed, a risk management plan developed, incident forms and other relevant documentation completed as per Trust policy.

4.15 When a member of staff is escorting a patient to appointments i.e. hospital, shopping and community activities or visiting at home, it is expected that the patient will not smoke whilst the member of staff is present.

4.16 Ensure that all escorted leave plans are negotiated in advance of leaving the ward, so that the patient is very clear he/she will not be permitted to smoke in the company of his/her escort. Patients should be given adequate NRT to use whether they are on or off the ward.

4.17 It should be noted that there are no exceptions to this policy and procedure in respect of patients, there are to be no designated areas within buildings where the use of cigarettes is allowed (this will include 136 suites).

5.0 COMMUNITY SERVICES

5.1 Passive smoking is a serious health risk for both those who smoke and those who do not smoke. Therefore smoking is not permitted on any part of the Trust premises including the grounds of Trust premises.

5.2 All clinical areas will provide information and literature advising on the dangers of smoking to health / benefits of quitting and sign-posting people to sources of help. Staff can order these resources free from Telephone: 0300 123 1002, or contact local smoking cessation services.
Community staff must inform patients of the Trust Smokefree policy at the first contact or earliest opportunity and provide a very brief advice on smoking.

Smoking cessation support will be offered to all patients and this must be clearly documented in patient’s records. Information on how to find your local smoking cessation service will be available on the Trust intranet. Alternatively go on smokefree.co.uk or call the NHS Smoking Helpline on 0300 123 1044.

Community based patients must be informed that if they are admitted to hospital, nicotine replacement therapy will be provided during their inpatient stay to assist with nicotine withdrawal symptoms and facilitate smoking abstinence.

When a member of staff visits a patient at home, it is expected that the patient will not smoke in the home whilst the member of staff is present. This also applies when staff are escorting a patient to appointments i.e. hospital, shopping and community activities.

Letters to inform community based patients of the smokefree environment will be sent by community teams at an earliest opportunity using Appendix 2 (EPUT Smokefree Environment Letter template) which is attached to this procedure.

If the patient refuses to not smoke, then the member of staff will be entitled to decide to ask the patient to ventilate the room or terminate the visit.

The member of staff may ensure that future contact arrangements are conducted in an alternative setting (e.g. Resource Centre) in order to ensure that s/he is not affected by passive smoking.

Patient Groups and Patient Advocacy Groups will be advised of the policy.

Smokefree notices are erected at all public entrances to Trust premises. By law, these must be A5 size, in colour, contain the “smokefree” logo and include the words: “Smokefree”. It is against the law to smoke in these premises”. Secondary, staff only entrances may have smaller (70mm minimum) smokefree symbol signs.

It is the responsibility of the unit and department Managers to ensure that these signs continue to be displayed and spare signs should be available in case of loss or damage.

Home based workers will not need smokefree signs unless they are visited by colleagues on a regular basis.
7.0 VEHICLES:

7.1 It should be noted that failure to display smokefree signs in vehicles regularly used by employees to transport patients or patients’ relatives/carers, other members of the public etc., is an offence as per the government smoke free regulations for England 2007 & 2012.

7.2 Smokefree signs for all Trust vehicles are provided by each lease company at the start of the lease period.

7.3 Trust vehicles that are required to be smokefree under the legislation must be smokefree at all times.

7.4 Please contact purchasing department with regards to obtaining smoking signs.

7.5 Lease cars – are designated as smokefree. Smokefree signs (minimum size 70mm) must be displayed in a way so as to be visible to all passengers.

7.6 Trust vehicles / Trust Hired vehicles - used by several employees/patients at different times must be smokefree and smokefree signs must be displayed (70mm minimum size) so as to be visible to all passengers.

7.7 Private/Personal cars – all employees will not be permitted to smoke or allow passengers to smoke whilst in their own vehicle on Trust premises. Employees are expected to have consideration for local neighbours. This includes avoiding smoking directly outside a neighbouring house, discarding cigarettes in neighbouring gardens and littering the neighbouring community.

8.0 TRAINING

8.1 Workforce Development team will ensure the workforce receives relevant curricula and on-going training and education.

8.2 All clinical staff will be trained at level 1 group/class training which enables staff to:
   a. Make every contact count (MECC) by delivering very brief advice (VBA) to patients, carers and staff on how to quit smoking.
   b. Understand the effect of stopping smoking on mental and physical health.
   c. Be aware of recent guidance and commissioning for quality and innovation (CQUIN) around mental and physical health. The Trust also provides on line (OLM) training for staff on very brief advice on smoking and physical healthcare screening for patients with serious mental illness to meet specific criteria of the CQUIN.

8.3 Level 2 training is for any staff that has done level 1 and wants to become an Adviser for their team/unit/department. Advisers play an important role in supporting patients, carers and staff in their quit smoking attempt and are able to effectively deliver stop smoking sessions using behaviour change techniques that are supported by MECC. They can also support smokers who do not wish to quit during an inpatient stay, to manage temporary
abstinence from tobacco. Staff can also access on–line training from the National Centre for Smoking Cessation Training http://elearning.ncsct.co.uk/

### 9.0 NON-COMPLIANCE

#### 9.1 Staff Breaches:

a. All Trust staff are expected to promote a smokefree environment and healthy living.

b. Staff should avoid condoning or advocating smoking.

c. Staff are obliged to support the implementation of the smokefree policy.

d. Managers have a duty to ensure that this policy is enforced within their area of management responsibility and to report incidents using the Datix system.

e. The Trust expects staff to act and to be seen as acting as role models to patients for smoking reduction/cessation.

f. If any staff member breaches the policy then in the first instance line managers should discuss the issue with them and ensure they fully understand the smokefree policy.

g. If staff continue to breach the policy then action through the disciplinary process may be appropriate. A failure to comply with this policy will be treated as misconduct and as such may lead to formal action in accordance with the Trust’s Disciplinary (Conduct) Policy.

h. All contracts with internal and/or external contractors will refer to strict smokefree agreements. The manager responsible for the employment of the contractor will be responsible for ensuring compliance.

#### 9.2 Visitors Breaches:

a. Visitors to the Trust will be made aware of the smokefree policy through signs, posters, leaflets as well as conversations with staff.

b. Carers will be provided with a list of the contraband items in the hospital which includes tobacco, cigarettes, lighters and matches.

c. Any visitor/carer who is found to be supplying a patient in hospital with contraband items will be reminded about the policy and asked to support the patient’s treatment plan. The rationale for the policy will be explained and visitors/carers will be offered support to learn more about the harmful effects of smoking. If appropriate they will be directed towards their local stop smoking service.

d. It is recommended that where staff choose to approach a patient or visitor to inform them of the Trust Smokefree policy, this approach is made only once. The information provided should be limited and along the lines of; *May I make you aware that this is a smokefree Trust within the hospital, buildings and grounds*.
e. A zero tolerance approach will be applied to any individual who becomes abusive when reminded of the policy. Should the person become aggressive then the member of staff is to walk away from the situation and seek support from their line-manager. Datix must be completed as per Trust policy on reporting incidents.

9.3 Patient Breaches:

a. Prior to planned hospital admissions patients will be advised that smoking is not permitted in the hospital or grounds and they will be offered support to temporarily abstain or quit. This will include nicotine replacement therapy and behavioural support. They will be asked not to bring tobacco, cigarettes, lighters or matches with them to hospital.

b. For unplanned admissions patients will not be permitted to keep tobacco, cigarettes / e-cigarettes, lighters or matches on their person. If carers or family members accompanied the patient to hospital, then they will be asked to take the prohibited items home. If the patients are unaccompanied when they arrive at hospital, staff will store their contraband items and they will be returned at the point of discharge.

c. Should the patient become aggressive when the smokefree policy is being implemented then the member of staff should summon assistance and the aggressive incident managed according to that person’s care plan. Restrained should only take place if the patient pose a risk of fire or their presentation escalates to the extent of potential harm to others or themselves. Datix must be completed as per Trust policy on reporting incidents.

d. Where there is no immediate risk the staff should discuss the breach with his/her colleagues and agree the most appropriate time and place to meet with the patient to review the care plan. Patients who are struggling to comply with the smokefree policy should have a review of their nicotine replacement therapy, and consideration given to increasing the amount of behavioural support that has been provided.

e. It should be noted that there are no exceptions to this policy in respect of patients, there are to be no designated areas within buildings where the use of cigarettes is allowed (this will include 136 suites and hospital grounds).

10.0 E-Cigarette Use

10.1 E-cigarettes are battery powered devices that deliver nicotine via inhaled vapour. Since e-cigarettes do not contain tobacco and are not burnt, they do not result in the inhalation of cigarette smoke they are therefore regarded as much safer delivery devices for nicotine. This does not mean that they are completely safe, but they are envisaged to be much less harmful than cigarettes. Further research findings, when available, will be considered and EPUT will have a flexible approach to the use of these devices.
10.2 E-cigarettes therefore may support compliance with EPUT’s smoke free policy and help smokers manage their nicotine dependence. Information from other mental health trusts has indicated that there is a desire among some patients and staff to use e-cigarettes to support cutting down or quitting tobacco use. EPUT feels that e-cigarettes should not simply replace cigarettes and that a culture of e-cigarettes replacing cigarette use does not develop.

10.3 EPUT currently supports the use of e-cigarettes, and would encourage the use of disposable devices which do not require any charging of filling with nicotine fluid. However, it is acknowledged that refillable devices will be preferred in some cases and conditions for the use of these is set out below. As new evidence emerges about e-cigarettes The Trust will review this position as more information regarding “smoking alternatives” comes to hand.

10.4 **Guidance for staff when facilitating non disposable e-cigarette use:**

   a) Staff will explain to patients and carers that nicotine replacement therapies (NRT) and other licensed stop smoking medicines such as bupropion and varenicline, when given together with intensive behavioural support, are the most effective way to stop smoking and ideally should only advise on e-cigarette use after patients have tried these treatments. Patients who wish to make a quit attempt must be supported to do so, and the actions required must be clearly documented in the individual’s care plan.

   b) Training for staff will be available, which will offer guidance on e-cigarettes and other harm reduction strategies; this training will include the “Very Brief Advice” e-learning, and further Level 1 e-learning, offering information regarding smoking cessation and Level 2 training to support smoking cessation, as a smoking cessation advisor.

   c) Information leaflets on e-cigarettes for patients should be used to develop a collaborative plan for any use of e-cigarettes, as they would with NRT or any other stop smoking medication.

   d) E-cigarettes will not be used in Trust indoor spaces.

   e) Currently e-cigarettes cannot be prescribed or supplied by staff until they are licensed by the MHRA.

   f) E cigarette can be brought into the service by patients or visitors.

   g) E-cigarette use by patients is only allowed in designated areas (e.g. hospital grounds), but not communal indoor areas.

   h) Staff should not replace fresh air (smoking) breaks with e-cigarette breaks.

   i) E cigarette use should not be included as part of therapeutic interventions or recreational conversations.

   j) E-cigarette users will be required to plan their use of these devices with their care team as part of their care plan (as they would with NRT) and allow staff to check the products that they are using.

   k) E-cigarettes and the associated e-liquids will be stored securely under staff control for infection control reasons and should not be stored near oxygen/naked flames.
l) E-cigarette users are expected to be considerate to those around them and always use the e-cigarette when in a designated area.
m) E-cigarettes must be disposed of in a designated bin so that the battery and plastic can be recycled in line with Waste Electrical and Electronic Equipment Regulations and European Union regulations. (Department of Health 2017)

n) E-cigarettes can be considered provided an individual risk assessment is complete and that staff comply with Department of Health guidance which is as follows:-

o) In addition to the risk of fire from recharging batteries, review the risks of withdrawing or discouraging e-cigarettes (including for example, relapse to smoking, impaired compliance with smoke free legislation, risk of fires from concealed illicit smoking) in your unit.

p) Assess the opportunities for safe, supervised charging of devices by designated staff in designated areas to further reduce risk.

q) Only use the batteries or chargers which come with the e-cigarette. To prevent batteries/chargers being mixed up, each must be clearly labelled with the patient’s name.

r) The individual instructions for each brand of e-cigarette must be checked and followed.

s) When the charge is complete disconnect battery and remove charger from USB port/socket – this is usually indicated by a light on the device.

t) Do not charge or use batteries which appear to be leaking, discoloured, rusty or deformed or otherwise appear abnormal.

u) Store batteries and chargers in a cool dry place at normal room temperature. Do not leave in hot places such as direct sunlight.

v) Keep away from any source of ignition and accelerants such as flammable objects and liquids, oxygen supply systems/cylinders, sparks and electrical equipment.

w) Do not immerse batteries or chargers in water or otherwise get them wet.

x) Do not disassemble, puncture, modify, throw, drop or cause any other unnecessary shocks to the batteries or chargers

y) Advise staff and patients of the approved safe use of e-cigarettes and fully train staff in, and regularly audit/enforce, any safe systems of work implemented. Please see attached leaflet regarding e-cigarettes.

11.0 MONITORING AND REVIEW

11.1 Managers will take reasonable steps to ensure that adequate arrangements are in place to enable the policy to be fully implemented at ward, department and clinic level, ensuring that all staff, patients and visitors comply with the policy.

11.2 There will also be a feedback process in place concerning progress and issues arising, via reports from key organisational meetings, including patient forums and regular nursing and senior management meetings.
11.3 All employees have a duty to comply with the requirements of this policy.

11.4 The policy will be monitored by a variety of different methods including an initial review within the next 12 months. Then after the initial review the Policy and Procedure will be reviewed every 2 years.

12.0 REFERENCES

- Public Health England: Smoking cessation and mental health - a public health concern: National Programme Manager: Seamus.watson@phe.gov.uk.
- ASH (October 2014) and also (April 2013) ASH Factsheet: Smoking Statistics (see www.ash.org.uk)
- Department of Health (2017) Additional information for Mental Health Units with regards to E-cigarettes, batteries and chargers Available at https://www.health-ni.gov.uk/publications/niaic-estates-and-facilities-alerts-publications
- Campion (undated) Public Health Review 7: Integrated Physical and Mental Health DOH. (Dr Jonathan Campion, director for public mental health, consultant psychiatrist at South London and Maudsley NHS Foundation Trust, and contributor for the Royal College of Psychiatrists)
- NICE Quality standard [QS82] Published March 2015
- NICE Guidance [PH49] Published date: January 2014
- NICE Guidance [CG48] Published May 2007
- Department of Health (https://www.gov.uk/government/organisations/department-of-health)

• World Health Organization. **About Secondhand Smoke**.

• Mental Health and Learning Disability Nurse Directors’ & Leads’ Forum (undated) [http://mhforum.org.uk/conferences/smoke-free-hospitals/](http://mhforum.org.uk/conferences/smoke-free-hospitals/)