KOOWEERUP REGIONAL HEALTH SERVICE POLICY AND PROCEDURE MANUAL

Smoke Free

DOCUMENT TYPE:

POLICY

TITLE:

Smoke Free

STAFF THAT THIS DOCUMENT APPLIES TO:

All Kooweerup Regional Health Service (KRHS) staff as well as students, consumers (patients, clients, residents) contractors, volunteers and visitors.

PURPOSE AND SCOPE:

Through the Smoke Free Policy, KRHS aims to proactively address smoking as a significant health risk for smokers and non-smokers, and thereby reduce the health impact of smoking for KRHS consumers, staff and the wider community.

POLICY STATEMENT:

Ensuring a smoke free environment is an important action in the protection of health and safety and eliminating exposure to environmental tobacco smoke

DEFINITIONS:

KRHS: Kooweerup Regional Health Service

NRT Nicotine Replacement Therapy

Electronic Cigarette (e-cigarette):

According to the *Tobacco Amendment Act 2016 (Victoria)*, an e-cigarette is a device that is designed to generate or release an aerosol or vapour (whether or not containing nicotine) by electronic means for inhalation by its user in a manner that replicates, or produces an experience similar to, the inhalation of smoke from an ignited tobacco product.

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Smoking:

According to the *Tobacco Amendment Act 2016 (Victoria)*, smoking means to smoke, hold or otherwise have control over, an ignited or heated tobacco product; or use an e-cigarette to generate or release an aerosol or vapour.

The Tobacco Act 1987 (Tobacco Act) prohibits smoking within four metres of building entrances (pedestrian access points) to public hospitals and registered community health service in Victoria. The use of electronic cigarettes is also prohibited in all legislated smoke-free areas.

DESIRED OUTCOME:

- Smoke free environment across KRHS sites
- Proactive promotion of a smoke free environment
- Appropriate smoking cessation support for consumers and staff.
- Ensure staff, and consumers who wish to reduce or quit smoking are aware of available cessation support and assistance.
- Encourage staff, and consumers who currently smoke to reduce or quit smoking.
- Ensure Residents retain their personal, civic, legal and consumer rights and are assisted to achieve active control of their lives within the Residential Care service.

PROCESS:

KRHS is committed to addressing smoking and other tobacco use, through three main pillars of activity:

- Clinical Care providing appropriate smoking/tobacco cessation advice and support to consumers
- Smoke Free / Tobacco Free Environment providing a smoke free and tobacco free environment within KRHS site and managing exposure risks for staff when care is provided externally.
- **Support for Staff** encouraging smoking/tobacco cessation by providing information and direct support through the Employee assistance program

Clinical Care:

KRHS staff will proactively address smoking including e-cigarettes (and other forms of tobacco use) as a routine aspect of clinical care throughout the service.

This will include:

- Identification of consumers smoking/tobacco use status and documented on history and Care Plan.
- Ensuring smoking / tobacco use status is identified and documented for all consumers

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 - Advice and assistance offered to consumers who smoke / use tobacco as appropriate to their situation.
 - Document and communicate management of a consumers smoking/ tobaccouse.

These aspects are summarised in the diagram below.

The steps represent a common framework for approaching smoking and tobacco use interventions; however, each clinical area is likely to vary their emphasis and specific processes to meet the individual requirements of their consumers and the nature of the service setting.

Diagram 1: 3As approach to clinical intervention for smoking (and other tobacco use)

ASK -

Everyone should be asked about smoking / tobacco use

ASSIST

All smokers should be provided with appropriate assistance to quit or abstain from smoking

ADVISE

All smokers' / tobacco users should be advised to quit

.

DOCUMENT / COMMUNICATE:

The 3 steps should be documented in the medical record and summarised in discharge communication to support continuity of care and ongoing intervention as appropriate.

INPATIENTS:

Management will be guided by the 3As approach

Patients should be provided with relevant information, including information about the Smoke Free Policy and about quitting smoking. Information resources are available on PROMPT (refer Linked documents).

Smoking cessation resources are available as prescribed.

Patients can be supported to access the **Quitline on 13 7848** to speak to a trained advisor or register for the call-back service or visit their website: https://www.quit.org.au/

AMBULATORY CARE:

Smoking/tobacco cessation advice and assistance will be offered as appropriate to patients attending ambulatory care services, including

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outpatients and community services. Care will be offered according to the 3As approach (Diagram 1).

RESIDENTS/RESPITE CLIENTS

Aged residents in aged residential care units are permitted to smoke in designated smoking areas.

Residents shall be assessed as safe to smoke unattended or be accompanied by a family member. In some circumstances they may need to need accompanied by a staff member.

A Smoking Risk Assessment is to be completed for all resident (permanent and Respite) who wish to smoke whilst residing in this facility (Lee Care – Falls and Other Risks/Safety Assessment or Smoking Risk Assessment – located under Policies and Procedures/Forms for all other clients/patients) in order to risk assess each residents/clients/patient's ability and competency in relation to smoking.

SMOKE FREE / TOBACCO FREE ENVIRONMENTS

Smoking including electronic cigarettes is prohibited within the grounds and inside any building or vehicle owned or operated by KRHS,

Policy compliance is facilitated through clear signage, education, publicity, promotion and reiteration of the Smoke Free Policy.

All staff members are responsible for educating their consumers about the Smoke Free policy and for encouraging adherence.

All staff members in supervisory positions are accountable for enforcing the Smoke Free Policy amongst their own staff. Staff, non-compliance may result in disciplinary action.

All staff members are responsible for encouraging adherence to the Smoke Free Policy.

All staff members are asked to assist in educating visitors/consumers of the Smoke Free Policy. Upon seeing visitors/consumers smoking within the boundaries of KRHS site, staff members are to inform the visitor/consumer of the Smoke Free policy and ask them to either extinguish their cigarettes or leave the premises. Designated areas are outside KRHS boundaries. If the there is a refusal to comply, staff are asked to use a common sense approach, do not place yourself at risk.

Smoking is only permitted outside the facility boundaries.

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Aged residents in aged residential care units are permitted to smoke in designated smoking areas.

- a) Courtyard outside WPU main Lounge area.
- b) Courtyard Nurses Station of Killara (right hand side near door to Bass Wing Corridor).

SPECIAL NOTE:

Killara and Westernport Unit Nurse Unit Managers have the flexibility to authorise smoking under special conditions for residents/patients.

OCCUPATIONAL HEALTH AND SAFETY CONSIDERATIONS:

KRHS has a duty to protect the health and safety of staff.

Staff must not accompany patients out of the premises to smoke or provide other assistance that might expose them to second-hand smoke.

The organisation seeks to ensure staff working outside KRHS premises are not placed at risk due to environmental tobacco smoke exposure. The risk of exposure for staff working in clients' or residents' homes/accommodation is managed through a formal risk assessment and management process (refer to Home Visit Guidelines and Home Visit Risk Screen).

STAFF

As a staff member you will be aware of the serious problems that smoking may cause to our healthcare and work environment and also to the safety of our patients, residents and fellow staff members.

For all staff, patients and visitors, smoking is not permitted anywhere on the grounds or within the building of Kooweerup Regional Health Service.

Staff may leave the premises for a cigarette and staff are reminded that they must comply with allocated time of breaks and cannot light up until outside the main gates including within vehicles on the grounds.

Staff wishing assistance to join the Quit Program may contact the Employee Assistance Program or Diabetes Nurse.

Failure to comply with this Policy will lead to disciplinary action being taken. See policy

EVALUATION:

Review of incident reports.

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Review of consumer complaints Staff health and wellbeing surveys

KEY LEGISLATION, ACTS & STANDARDS:

Under the Occupational Health and Safety Act, 2004, employers are required to take all measures that are practicable to protect the health and safety of employees and others in the workplace.

The Tobacco Act 1987 (including amendments to 2013 banned smoking in enclosed public areas. Enclosed means areas that are substantially enclosed by a roof and walls, regardless of whether the roof and walls or any part of them are permanent or temporary, open or closed.

Under the Tobacco Act, smoking is also banned inside hospital buildings and under The Tobacco Amendment Act 2016 e-cigarettes, including prescribed e-cigarettes, cannot be used in areas where smoking is banned.

Occupational Health & Safety Act 2004

Aged Care Standards - Living Environment, Choice and Decision Making

RELEVANT STANDARDS-

Aged Care Quality and Safety Commission Quality Standards 2019 by Standard:

- 1 Standard 1. Consumer dignity and choice
- 5 Standard 5. Organisation's service environment
- 8 Standard 8. Organisational governance NSQHSS by Standards v2:
- 1 Clinical Governance

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