NICE GUIDANCE PH48 TOOLKIT DOCUMENT 13: TEMPLATE SMOKEFREE STEERING GROUP ACTION PLAN

Workstream	NICE PH48 Recommendation	Lead	Aim	Suggested actions	Progress	Next steps
Leadership	10 - Provide leadership on stop smoking support	Clinical / Medical Director as Smokefree Programme Lead	Assign Medical or Clinical Director as Programme Lead	In addition, assign suitably qualified / experienced person as dedicated Smokefree Project Lead Identify and secure sufficient resources to maintain effective implementation of the Smokefree policy		





Strategy	 11 - Develop Smokefree policies 15 - Ensure local tobacco strategies include secondary care 16 - Commission Smokefree secondary care services 	Smokefree Project Lead Head of HR Head of Estates & Facilities Smokefree Lead	Policy is developed in-line with PH48 in collaboration with people who use or work within the Trust Everyone is made aware of the policy and comply with it. There are no smoking shelters or designated smoking areas anywhere on-site Effective partnership working with key organisations are further developed. Service specification /agreements require that all staff are trained to deliver Very Brief Advice (VBA) Work with local stop smoking service provider continues to develop / strengthen	 Work with: Staff-side Patient and Carer groups Develop and communicate plan to ad-dress breaches of policy including an effective recording mechanism for all breaches to be recorded as untoward incidents due to fire risks Access toolkit document 2 - Smokefree Policy: Section 5.3 for recommended steps. All smoking shelters are removed. If not removed, there should be clear signage to state the purpose of the shelter, and regular audit to ensure smoking is not occurring Ensure NHS standard contract, JSNA and local Tobacco Control Plan include joint Smokefree work Sign Local Government Declaration on Tobacco Control Smokefree Group is established, and TOR agreed Access toolkit document 15 - Template terms of reference here. Smokefree Lead sits on relevant exter-nal groups Key partners sit on Smokefree Steering group Access toolkit document 4 - Partnership working contract here. Develop clear care pathway and referral procedure Consider Honorary contracts 		
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Communication	 1 - Provide information for planned or antici- pated use of secondary care 5 - Provide information and advice for carers, family, other house- hold members and hospital visitors 12 - Communicate the Smokefree policy 	Head of Comms	On first contact everyone is told that the Trust operates a Smokefree policy and therefore, anyone who smokes will have to abstain while visiting/using secondary care services Encourage all who smoke to quit completely Risks of secondhand smoke are communicated Everyone, who uses, visits or works in the Trust is told of the Smokefree policy	Management of smoking prior to planned admission is part of the patient care plan Performance management and feed-back is provided to all staff Include information on Smokefree homes Access toolkit document 14 – Comms. guide here. Examples: Signage: Internal / External Website: Intranet / Blogs / Tweets Press release / Internal / external pub-lications Telephone message Clinical Letters Pre-op appointments Case studies Radio Countdown Banners Staff / Email briefings Screen savers Contractors aware and sign Smokefree Contract Access toolkit document 5 – Third party SF contract here.	
Training	14 - Provide stop smoking training for frontline staff	Smokefree Lead	All staff are provided with information about the Smokefree policy and their roles & responsibilities Ensure staff know and communicate that nicotine is not the cause of damage to health from smoking	 Information in all recruitment documents & contracts / interviews / performance reviews / payslips / induction training. Access toolkit document 3 – Roles & Responsibilities here. Ensure front-line staff are proficient in using carbon monoxide monitoring as a motivational tool. Access toolkit document 11 – Carbon monoxide monitoring crib sheet here. 	



Treatment & support	 2 - Identify people who smoke and offer help to stop 3 - Provide intensive support for people us-ing acute mental health services 4 - Provide intensive support for people us-ing maternity services 6 - Advise and provide stop smoking pharma- cotherapies 	Smokefree Lead	All patients receive Very Brief Advice Smoking status is recorded Potential to reduce the dose of some treatments when stopping smoking is discussed with recommendation to seek medical advice if any side effects are noticed Record all smoke related intervention in patient care plan and records All stop smoking pharmacotherapies (NRT, varenicline and bupropion) are included in secondary care formularies	 Staff are trained in VBA [Link to Toolkit Document - 12 Training Plan] [Link to Toolkit Document 10 - SF Care Pathway] Inform primary care teams about changes in smoking behaviour so that drug dosages are monitored and adjusted as necessary Develop appropriate systems to capture all necessary data. Access toolkit document 7 - Assessment & Evaluation here. PGD, SOP or Homely Remedies is in place. Self-administration of medicines policy supports patients with use of fast acting NRT. Procedures should include appropriate advice for patients undergoing microvascular reconstructive surgery. Access toolkit document 8 - Example NRT procedure here. 	
	7 - Adjust drug dosages for people who have stopped smoking 8 - Make		Immediate access to NRT is in place for temporary abstinence throughout hospital stay, and on discharge Varenicline is offered to patients	 Varenicline policy is developed. <u>Access toolkit</u> <u>document 9 – Varenicline information here.</u> Staff can access stop smoking support via [Insert details] 	
	stop smoking harmacotherapies available in hospital		wishing to make a quit attempt NRT can be accessed by visitors and staff	 Visitors can access stop smoking support via [Insert details] See Communications workstream. 	
	9 - Put referral systems in place for people who smoke		Stop smoking services are available on-site		
	13 - Support staff to stop smoking		Staff are advised to stop smoking and or to use NRT for temporary abstinence		



Safety & Security	 1 - Provide information for planned or anticipated use of secondary care 5 - Provide information and advice for carers, family, other household members and hospital visitors 10 - Provide leadership on stop smoking support 	Head of Fire / Security	All staff, patients, visitors etc. are aware of the policy at first contact. Advice is given to consider how to manage nicotine withdrawal symptoms before admission where possible. Information is given regarding risks associated with charging of any electrical device . e.g. for, for patients and visitors, this could be posters/signs near accessible socket outlets. Systems	See Communications workstream.Staff: • Safety briefing • eLearning for staff • Staff inductionPatients and visitors: • Posters • Signs near accessible socket outletsAccess toolkit document 6 - Vaping policy guide here.Reporting of untoward incidents systems are in place and widely communicated through training and monitoringAccess toolkit document 7 - Assessment & Evaluation here.	
Audit and Evaluation		Senior Data Analyst	Ensure systems are in place to effectively measure implementation and impact of the Smokefree policy	Agree local improvement programme for stop smoking support for all who smoke Access toolkit document 8 - Example NRT procedure here.	

