



Guidance on Service Users Smoking in Residential Care and Nursing Homes

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CONTENTS

	Page
Foreword	3
1. Introduction	4
2. Key Principles	5
3. Risk Assessment	6
4. Smoking Areas Within Homes	6
5. Staff and Members of the Public	7
6. Policies and Procedures	8
7. Record Keeping	8
8. Fire Risk Assessment	9

FOREWORD

Where an individual residing in a registered residential care or nursing home chooses to smoke, it is important that appropriate arrangements are in place to facilitate this in a way which ensures the safety of the service user and those sharing the accommodation.

In some circumstances, service users may be capable of retaining smoking materials including matches and lighters and of managing their smoking activities safely and without supervision.

In many other circumstances, service users may lack the capacity to do this safely.

This guidance is aimed at assisting registered providers in implementing appropriate arrangements, which are safe but which do not unreasonably restrict service users from smoking.

This guidance is directed at service users. Smoking by employees should be dealt with separately by the employer in line with relevant legislation.

1. INTRODUCTION

- 1.1. This guidance makes reference to the term service user. This incorporates patients in nursing homes and residents in residential care homes.
- 1.2. This guidance provides an overview of the key principles that should be taken into consideration when service users choose to smoke.
- 1.3. This guidance should be read in conjunction with the following relevant legislation and standards which are available on RQIA website www.rqia.org.uk and/or Department of Health, Social Services and Public Safety (DHSSPS) website: www.dhsspsni.gov.uk :

1.1. Legislation

- The Nursing Homes Regulations (Northern Ireland) 2005
www.legislation.gov.uk/nisr/2005/160/contents/made
- The Residential Care Homes Regulations (Northern Ireland) 2005
www.legislation.gov.uk/nisr/2005/161/contents/made
- The Smoking (Northern Ireland) Order 2006
www.legislation.gov.uk/nisi/2006/2957/contents
- The Smoke-free (Exemptions, Vehicles, Penalties and Discounted Amounts) Regulations (Northern Ireland) 2007
www.legislation.gov.uk/nisr/2007/138/contents/made

1.2. Standards

- The Nursing Homes Minimum Standards (2008)
www.rqia.org.uk/cms_resources/Care%20Standards%20Nursing%20Homes%20Jan%202008.pdf
- The Residential Care Homes Minimum Standards (updated 2011)
www.rqia.org.uk/cms_resources/care_standards_-_residential_care_homes_August_2011.pdf
- Relevant Public Health Agency standards and guidance
www.healthpromotionagency.org.uk/Work/Tobacco/campaigns7.htm

1.3. This list is not exhaustive and may change over time. Service providers should ensure that they comply with all relevant legislation, standards and circulars.

2. KEY PRINCIPLES

2.1. The following principles should be adopted for service users who wish to smoke:

- a) A risk assessment must be carried out for each service user who wishes to smoke
- b) Service users must only smoke in rooms or areas which are designated for that purpose.
- c) The safety of service users must take precedence over stated preferences.
- d) Smoking arrangements for staff and members of the public must comply with the Smoke Free Regulations (Northern Ireland) 2007. See section 5 below.

3. RISK ASSESSMENT

3.1. Risk assessments:

- a) must be carried out for each service user who wishes to smoke.
- b) must be carried out by someone with sufficient understanding of the service user's needs and of the wider impact on fire and health and safety.
- c) must be carried out in partnership with the service user and any other relevant persons.
- d) must consider the service user's physical ability and mental capacity to undertake smoking activities safely.
- e) must consider the risks to other service users and other occupants of the building, including staff .
- f) must identify the physical precautions as well as the management arrangements such as appropriate level of supervision necessary to ensure that the service user can smoke without presenting danger to themselves or others.
- g) must be reviewed regularly i.e. when there is a change in needs, and at least annually.

4. SMOKING AREAS WITHIN HOMES

4.1. Smoking areas

- a) Providers must identify specific smoking rooms or areas as part of the communal space commensurate with the needs of the service user group.
- b) Smoking rooms or areas must be suitably equipped, finished and furnished. Consideration should be given to the following:
 - Fire retardancy of furniture, fabrics and finishes
 - Provision of appropriate smoke detection and smoke alarms
 - Provision of fire extinguishing equipment including fire blanket
 - Provision of suitable metal ashtrays.

- c) Smoking rooms must be appropriately ventilated to avoid contamination of adjacent areas and rooms by smoke. Inside buildings, this will normally be achieved by the provision of appropriately sized mechanical ventilation systems.
- d) Where smoking areas for service users are located outside, they should offer an appropriate degree of comfort, be suitably sheltered and easily accessible. Paths and access routes should be level and free from hazards.
- e) Service users should not be permitted to smoke in bedrooms unless their individual risk assessment specifically deems that the level of risk is low.
- f) Service users should not be permitted to smoke in bedrooms unless the bedrooms have been suitably equipped. See 4.1. b) and c) above.

5. STAFF AND MEMBERS OF THE PUBLIC

5.1. Staff and public smoking

- a) For guidance on smoking arrangements for staff and members of the public within registered establishments, providers should refer to the Smoke Free Regulations (Northern Ireland) 2007. The Public Health Agency (PHA) have published guidance which can be accessed on the website:
www.healthpromotionagency.org.uk/Work/Tobacco/campaigns7.htm
- b) Staff and public smoking areas should be separate from areas provided for service users.

6. POLICIES AND PROCEDURES

- 6.1. A policy and associated procedures must be developed by the provider, which detail how smoking is to be managed in the home.
- 6.2. The policy should clearly outline the provider's position on service user smoking as well as the arrangements for staff and members of the public.
- 6.3. Procedures should include fire safety arrangements relating to smoking and the procedure for supervision of service users who smoke based upon the outcome of the individual risk assessments. They should also specify the arrangements for the management and control of smoking materials.
- 6.4. Appropriate evacuation procedures in the event of fire.

7. RECORD KEEPING

- 7.1. The following records must be retained:
 - a) Copy of individual service user risk assessments which have been signed off by the assessor, the manager and the HSC Trust Care Manager if appropriate.
 - b) Records relating to any precautions and management arrangements which have been implemented as a result of the risk assessment.

8. FIRE RISK ASSESSMENT

8.1. The fire risk assessment must take cognisance of the smoking arrangements and the impact they have upon fire safety in the premises. The fire risk assessor will need to be consulted accordingly. Guidance on fire risk assessment can be found at:

www.nifrs.org/firesafe/guidance.php

www.rqia.org.uk/cms_resources/DH1%2011%20938%20%20NIHTM%2084%20-%20Fire%20Risk%20Assessment%20in%20Residential%20.pdf



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