

Stopping smoking in the workplace

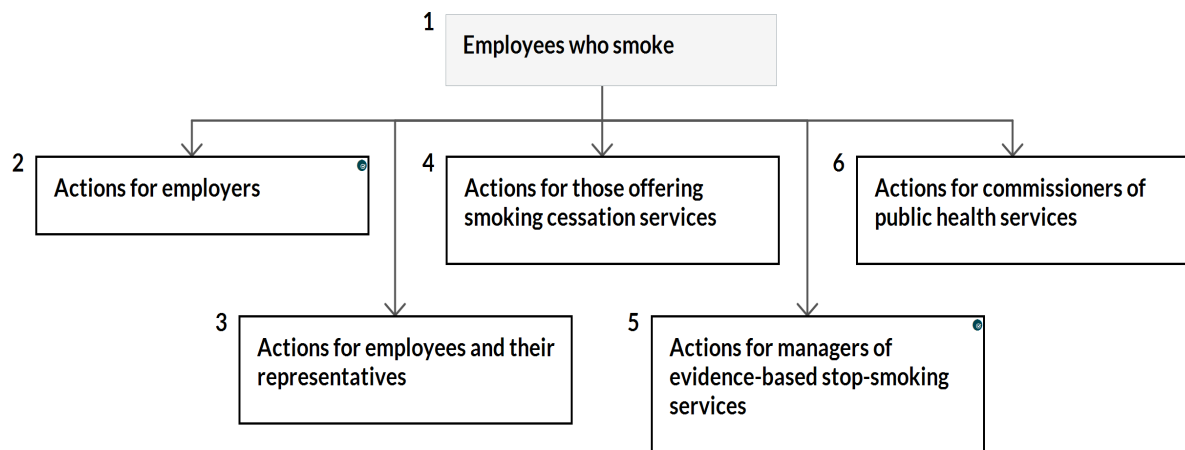
NICE Pathways bring together everything NICE says on a topic in an interactive flowchart. NICE Pathways are interactive and designed to be used online.

They are updated regularly as new NICE guidance is published. To view the latest version of this NICE Pathway see:

<http://pathways.nice.org.uk/pathways/smoking>

NICE Pathway last updated: 05 November 2020

This document contains a single flowchart and uses numbering to link the boxes to the associated recommendations.



1 Employees who smoke

No additional information

2 Actions for employers

Publicise the following interventions: brief interventions, individual behavioural counselling, group behaviour therapy, pharmacotherapies, self-help materials and telephone counselling and quitlines. Make information on local stop smoking support services widely available at work. This information should include details on the type of help available, when and where, and how to access the services.

Be responsive to individual needs and preferences. Where feasible, and where there is sufficient demand, provide on-site stop smoking support.

Allow staff to attend smoking cessation services during working hours without loss of pay.

Develop a smoking cessation policy in collaboration with staff and their representatives as one element of an overall smokefree workplace policy.

Workplaces subject to regulations under the 2006 Health Act

Negotiate a smokefree workplace policy with employees or their representatives. This should:

- State whether or not smoking breaks may be taken during working hours and, if so, where, how often and for how long.
- Direct people who wish to stop smoking to local stop smoking support.
- Implement NICE's guideline on smoking: workplace interventions.

For recommendations for secondary care providers, see what NICE says on [smoking cessation in secondary care](#).

Quality standards

The following quality statements are relevant to this part of the interactive flowchart.

Smoking: reducing and preventing tobacco use

4. Workplace policy

5. Healthcare services: employee contracts
6. Healthcare settings: smokefree grounds

3 Actions for employees and their representatives

Employees who want to stop smoking should contact local smoking cessation services for information, advice and support.

Employees and their representatives should encourage employers to provide advice, guidance and support to help employees who want to stop smoking.

4 Actions for those offering smoking cessation services

All those offering smoking cessation services including the NHS, independent or commercial organisations and employers should:

- Offer one or more interventions that have been proven to be effective.
- Ensure smoking cessation support and treatment is delivered only by staff who have received training that complies with the [standard for training in smoking cessation treatments](#).
- Ensure smoking cessation support and treatment is tailored to the employee's needs and preferences, taking into account their circumstances and offering locations and schedules to suit them.

5 Actions for managers of evidence-based stop-smoking services

Offer support to employers who want to help their employees to stop smoking. Where appropriate and feasible, provide support on the employer's premises.

If initial demand exceeds the resources available, focus on the following:

- small and medium-sized enterprises
- enterprises where a high proportion of employees are on low pay
- enterprises where a high proportion of employees are from a disadvantaged background
- enterprises where a high proportion of employees are heavy smokers.

Quality standards

The following quality statement is relevant to this part of the interactive flowchart.

Smoking: reducing tobacco use

4. Workplace policy

6 Actions for commissioners of public health services

Commissioners of public health services should ensure local evidence-based stop-smoking services are able to respond to fluctuations in demand, particularly before and after implementation of smokefree legislation.

Glossary

Brief interventions

(interventions that help people stop smoking, involving opportunistic advice, discussion, negotiation or encouragement and, where necessary, referral to more intensive treatment; they are delivered by a range of professionals, typically in less than 10 minutes)

Group behaviour therapy

(programmes that involve weekly meetings for the first 4 weeks of a quit attempt, during which people who smoke receive information, advice and encouragement and some form of behavioural intervention (for example, cognitive behavioural therapy) delivered over at least two sessions)

Individual behavioural counselling

(a face-to-face encounter between someone who smokes and a counsellor trained in smoking cessation)

Pharmacotherapies

(nicotine replacement therapy, varenicline or bupropion as an aid to help people to quit smoking)

Self-help materials

(any manual or structured programme, in written or electronic format, that can be used by individuals in a quit attempt without the help of health professionals, counsellors or group support)

stop smoking support

(includes interventions and support to stop smoking regardless of how services are commissioned or set up)

Telephone counselling and quitlines

(proactive or reactive advice, encouragement and support over the telephone to anyone who smokes who wants to quit, or who has recently quit)

Sources

Stop smoking interventions and services (2018) NICE guideline NG92

Smoking: workplace interventions (2007) NICE guideline PH5

Your responsibility

Guidelines

The recommendations in this guideline represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, professionals and practitioners are expected to take this guideline fully into account, alongside the individual needs, preferences and values of their patients or the people using their service. It is not mandatory to apply the recommendations, and the guideline does not override the responsibility to make decisions appropriate to the circumstances of the individual, in consultation with them and their families and carers or guardian.

Local commissioners and providers of healthcare have a responsibility to enable the guideline to be applied when individual professionals and people using services wish to use it. They should do so in the context of local and national priorities for funding and developing services, and in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities. Nothing in this guideline should be interpreted in a way that would be inconsistent with complying with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

Technology appraisals

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, health professionals are expected to take these recommendations fully into account, alongside the individual needs, preferences and values of their patients. The application of the

recommendations in this interactive flowchart is at the discretion of health professionals and their individual patients and do not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian.

Commissioners and/or providers have a responsibility to provide the funding required to enable the recommendations to be applied when individual health professionals and their patients wish to use it, in accordance with the NHS Constitution. They should do so in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

Medical technologies guidance, diagnostics guidance and interventional procedures guidance

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, healthcare professionals are expected to take these recommendations fully into account. However, the interactive flowchart does not override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

Commissioners and/or providers have a responsibility to implement the recommendations, in their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations. Nothing in this interactive flowchart should be interpreted in a way that would be inconsistent with compliance with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.