

E – Cigarette Policy

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Executive Summary

This policy defines how e-cigarettes will be used within East London Foundation Trust. This includes provision for defined use within the Trust.

The policy recognises that the use and development of e-cigarettes and the surrounding evidence base is moving with pace. Since the policy was introduced in April 2017 Public Health England has published an independent expert evidence review the key findings of which are:

- Vaping poses only a small fraction of the risks of smoking and switching completely from smoking to vaping conveys substantial health benefits;
- E-cigarettes could be contributing to at least 20,000 successful new quits per year and possibly many more;
- E-cigarette use is associated with improved quit success rates over the last year and an accelerated drop in smoking rates across the country;
- Many thousands of smokers incorrectly believe that vaping is as harmful as smoking; around 40% of smokers have not even tried an e-cigarette;
- There is much public misunderstanding about nicotine. Less than 10% of adults understand that most of the harms to health from smoking are not caused by nicotine;
- The use of e-cigarettes in the UK has reached a plateau over the last few years at just under 3 million;

The evidence does not support the concern that e-cigarettes are a route into smoking among young people. Youth smoking rates in the UK continue to decline. Regular use is rare and is almost entirely confined to those who have smoked.

1. Introduction, Duties and Purpose

East London Foundation Trusts (ELFT) is a Smoke Free Trust. An integral part of the Smoke Free strategy is support to service users and staff to stop smoking permanently as well as on a temporary basis while they are on Trust premises. E-cigarettes (EC) can be used as a nicotine replacement to facilitate this.

This policy defines how ELFT will approach the use of EC. It is the duty of all staff to implement this policy in their service.

Concerns about the use of EC in the mental health context are listed below and the policy seeks to mitigate these;

- EC use as a substitute addiction – the current evidence does not support the concern that electronic cigarettes encourage subsequent smoking.
- The 'passive smoking' effect on other service users and staff.
- The use of EC systems to inhale other banned substances.
- The risk of fire from the electrical elements of EC (the PHE update considered that this was comparable to other similar domestic electrical products and should be subject to the same guidelines and safety mechanisms).

The 2018 update of the e-cigarette policy included;

- Broadens the type of e-cigarette allowed for all areas other than in Forensic units where only single use, disposable e-cigarettes will be allowed.
- Allows use of e-cigarettes in communal areas inside at the discretion of ward staff.

2. The Use of E-cigarettes on ELFT premises

A patient's use of e-cigarettes will be defined and documented within their care plan as a mechanism to facilitate smoking cessation. E-cigarette use is not allowed by people less than 18 years of age.

The use of e-cigarettes should bear in mind respect for others, service users and staff, who may not wish to inhale the products of vaping.

Final decisions related to e-cigarette use rests with the ward manager.

Where an in-patient service user is suspected of using illicit substances by any method including via an e-cigarette the service user will be obliged to undergo urine drug screening.

2.1. The type of e-cigarette allowed on ELFT premises

All e-cigarettes are allowed.



Disposable: Allowed with care plan and risk assessment



**Pre filled re-chargeable:
Allowed with care plan and risk assessment - not Forensics**



**Re-chargeable tank models (refillable): Allowed with care
an and risk assessment – not Forensics**



2.2. Where e-cigarettes can be used

E-cigarettes are allowed in single bedrooms and hospital grounds.

Where e-cigarettes are used in bedrooms care should be taken to provide adequate ventilation opening windows and doors.

Where second and third generation e-cigarettes are used the e-cigarette should be adjusted to a low vapour setting out of respect to other service users and staff and to avoid setting off the fire alarm.

Use in day areas, communal areas, clinical areas, ward gardens or during group or individual therapy should be by mutual agreement between service users and ward staff.

2.3 Individual Risk Assessment of the use of vaporisers

Staff will need to consider the following issues in deciding whether an individual can safely retain and use e-cigarettes and vaporisers:

1. Self-harm risk: E-cigarettes and cartridges contain plastic and small quantities of glass, and vaporisers contain metal which can be sharpened; all of these can be used for self-harm by cutting or ingestion. The risks are similar to those involved in the possession of pens or other small personal items, which need to be removed from individuals in certain circumstances to prevent self-harm.
2. Ingestion of nicotine: The quantities of nicotine contained in a cartridge refill are less than one tenth of the minimum fatal overdose and bottles of e-liquid nicotine less than half. In addition ingestion of nicotine tends to cause nausea and vomiting which limits its potential for toxicity. However, patients may believe it to be toxic, and take overdoses which could lead to headache, nausea, and tachycardia. As with any medication or toxin, the possibility of hoarding of cartridges and bottles of nicotine should be considered when assessing the propensity to self-harm. Bottles of e-liquid should be stored in ward offices.
3. Risks from cables: As with any electronic device, vaporisers use accessories including cables and mains chargers which can be used for the purposes of self-harm or for causing fire.
4. Fire risk from chargers: Batteries can pose a low, but not negligible, risk of overheating while on charge. USB port charging can be provided via ward offices where USB multi-port chargers will be provided. Patients should not be permitted to plug their own chargers into the mains, as this may cause a fire risk. (If devices such as laptops are plugged into the mains and used to provide a USB port, they should be subject to portable appliance testing (PAT)).
5. Adulteration of e-liquid with other drugs of abuse: This is unlikely to be common in acute settings where illicit drugs can be obtained by simpler methods. However, where individuals appear to be intoxicated or are at high risk of substance misuse, consideration should be given to declining or disposing of any e-liquids supplied by the patient or family and only e-liquid purchased under supervision permitted.

3. Provision of e-cigarettes

E-cigarettes will not be supplied by ELFT pharmacy. Service users and staff should obtain their own supply, in line with the types allowed information above, if they wish to use an e-cigarette.

ELFT will endeavour to ensure that service users have access to e-cigarettes locally and via Trust retail outlets.

4. Charging E-cigarettes

- Charging e-cigarettes is only to be carried out in the nurse's station and under staff supervision.
- Only the battery and charger provided with the e-cigarette should be used when charging.
- Manufacturers instructions and guidance should be followed when charging e-cigarette battery packs.
- Do not leave an e-cigarette charging unattended or overnight.
- Power adaptors should comply with the Electrical (Safety) Equipment Regulations 1994 and the Electromagnetic Compatibility Regulations 2006. The Regulations require that power adaptors must be marked with the following:
 - CE mark
 - Manufacturer name
 - Identifier; Model / type / serial number.
 - The rated voltage / current etc.

5. Disposal of E-cigarettes

E-cigarettes should not be disposed of in normal or clinical waste. They should be disposed of in a battery bin.

6. Staff member use of E-cigarettes

Evidence shows that the risk to the health of bystanders from exposure to vapour from nicotine e-cigarettes / vapourisers is extremely low and insufficient to prohibit the use of e-cigarettes. There is no legal ban on the use of nicotine e-cigarettes / vapourisers in enclosed places. However under this policy, ELFT staff members and staff members of third party sub-contractors are not authorised to use e-cigarettes in Trust buildings or Trust vehicles. They can be used in trust grounds as long as they do not cause a disturbance to service users, staff members or members of the public. The Trust is keen to emphasise that there is a clear distinction between smoking and vaping. Vaping in public places is unlikely to do any harm, however it may be viewed as a nuisance by some people.

7. References

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8. Associated documentation

Service user and carer information leaflet (in Microsoft publisher format) - To follow