

Briefing for the NHS Smokefree Pledge

This briefing note includes background information about the commitments in the [NHS Smokefree Pledge](#) and how NHS organisations can support the delivery of a Smokefree 2030.

What is the NHS Smokefree Pledge?

The Pledge is designed to be a clear and visible way for NHS organisations to show their commitment to helping smokers to quit and to providing smokefree environments which support quitting. In signing the NHS Smokefree Pledge, organisations commit to reduce the harm caused by tobacco through implementing comprehensive smokefree policies, as outlined in this document. The full Pledge document and commitments can be viewed [here](#).

In March 2022, the NHS Smokefree Pledge was relaunched to bring it in line with the government's [ambition](#) for England to be smokefree by 2030 and commitments to improve the smoking cessation support available through the NHS, as outlined in the [NHS Long Term Plan](#) (LTP), the 2017 [Tobacco Control Plan for England](#) and [NICE Guidance \[NG209\]](#).

The Pledge has been endorsed NHS England, the Academy of Medical Royal Colleges, the Association of Directors of Public Health, the Royal College of Midwives, the Faculty of Public Health, and the British Medical Association.

The Pledge should be signed by individuals in leadership positions within their NHS Trust or Integrated Care Board (ICB). This highly visible leadership should be accompanied by communications work and strategic activity to implement the Pledge commitments.

Signatory organisations should contact admin@smokefreeaction.org.uk to ensure they are listed on the Pledge [website](#).

Why does the NHS Smokefree Pledge matter?

In England alone, almost [75,000 people](#) die from smoking related diseases each year. Smoking accounts for over one-third of all deaths from respiratory disease, one quarter of all deaths from cancer and over one tenth of all deaths caused by circulatory diseases. On average, smoking reduces life expectancy by [10 years](#). If hospitalised, people who smoke are more likely to require longer stays and need intensive care [after surgery](#).

Thus, smoking creates an inevitable cost to society and to the NHS. ASH estimates that smoking costs the NHS approximately [£2.4 billion](#) each year through smoking-related hospital admissions and the cost of treating smoking related illness via primary care services. Delivering the commitments in the NHS Smokefree Pledge will not only bring us closer to national targets to reduce smoking rates but can ultimately save tens of thousands of lives and billions of pounds in NHS resources.

NHS Smokefree Pledge commitments

1. Treat tobacco dependency among patients and staff who smoke in line with commitments in the NHS Long Term Plan and Tobacco Control Plan for England

- The NHS Long Term Plan commits to offering all people admitted to hospital who smoke NHS-funded tobacco treatment services by 2023/4. Guidance on supporting people to stop smoking in secondary care services is available [here](#). Guidance on implementing the LTP is available [here](#) and [here](#).
- NHS staff act as “role models” for patients who smoke. As such, it is important that staff who smoke are also supported to quit smoking [see NICE Guidance NG209, [Section 1.14.27](#)].

- 2. Ensure that smokers within the NHS have access to the medication they need to quit in line with NICE guidance on smoking in secondary care [NG209, [Section 1.12](#)]**
 - Nicotine replacement therapy (NRT) such as patches or nicotine gum should be readily available to all smokers within the NHS. Alongside this, smokers and healthcare professionals should consider the use of medications such as bupropion.
 - NICE recommends that smokers are also advised about using e-cigarettes to stop smoking. E-cigarettes (vapes) are currently the [most popular quitting aid](#) in the UK, being used by around three million people. Most e-cigarette users [are current or former smokers](#) who primarily use them to quit or cut down smoking. Evidence shows that these devices are likely to be significantly less harmful than smoking tobacco and up to [70% more effective](#) for helping smokers quit than NRT.
- 3. Create environments that support quitting through implementing smokefree policies as recommended by NICE**
 - A comprehensive smokefree policy promotes a healthy environment which supports attempts to quit or abstain from smoking. Implementing a comprehensive smokefree policy involves more than preventing smoking onsite – it should also include treating tobacco dependence among patients *and* staff. See NICE Guidance [NG209] [[Section 1.21](#)] for advice on implementing smokefree policies.
- 4. Deliver consistent messages to smokers about harms from smoking and the opportunities to quit in line with NICE guidance on brief advice**
 - NICE Guidance [NG209] [[Section 1.23](#)] recommends all frontline NHS staff are trained to offer very brief advice (VBA) to smokers. Free e-learning on how to deliver VBA on smoking is available [here](#).
- 5. Actively work with local authorities and other stakeholders to reduce smoking prevalence and health inequalities**
 - New NHS tobacco dependency treatment services are additional and complementary to the stop smoking services already being provided by local authorities. NHS, local authorities and other stakeholders will need to work together to ensure that patients are supported to quit during their interaction with the health service, but also when they go back into the community. This collaboration should be facilitated by Integrated Care Boards.
 - Examples of effective partnership working to deliver the LTP commitments are available [here](#).
- 6. Protect tobacco control work from the commercial and vested interests of the tobacco industry**
 - The UK is a party to the WHO treaty on tobacco: the [Framework Convention on Tobacco Control](#) (FCTC). Article 5.3 of the FCTC commits organisations to protect health policies from the commercial and vested interests of the tobacco industry. Organisations should: a) Have a clear corporate policy in place on engagement with the tobacco industry which all staff are aware of and, b) review current prescribing practice in line with NICE guidance and the best available evidence. Guidance on the implementation of article 5.3 is available [here](#).
- 7. Support government action at national level**
 - Making smoking obsolete will require national action to reduce smoking uptake and help existing smokers quit. In addition to treating tobacco addiction, NHS organisations should integrate local and regional smokefree messaging with national communication strategies on smokefree policies, in line with NICE NG209 [[Section 1.1](#)].
 - NHS organisations can also show their support for the Smokefree 2030 ambition [here](#).
- 8. Join the Smokefree Action Coalition (SFAC)**
 - The SFAC is an alliance of over 300 organisations including the medical royal colleges, the British Medical Association, ASH, Cancer Research UK, the British Heart Foundation. The Coalition has played an important role in campaigning for national and local tobacco control policies and continues to campaign for a Smokefree 2030. The full membership is listed [here](#).
 - For more information about the Coalition and how to join, click [here](#).

Once you've signed the Pledge...

Communicate the commitment the Trust/ICB has made – Congratulations! You are the latest signatory to the Pledge. Now you can amplify your commitment by sharing it with employees, members of the public, and partner organisations. You can share the good news on Twitter using the hashtag [#NHSpledge](#) or publicise the Pledge in local media via a press release. Don't forget to send us any photos of you holding the signed pledge or any social or media coverage to share at admin@smokefreeaction.org.uk

Don't let the Pledge gather dust on a shelf – The NHS Smokefree Pledge is meant to be a live document, not a one-time commitment. Review local policies and practice and embed the Pledge's commitments into local plans and activity. You can use resources below to help you do this.

Useful links and resources

Resources to support practice

- [NHS Futures](#) – Pulls together useful resources to facilitate rollout of tobacco dependence treatment services – includes delivery models, case studies, competency frameworks, governance etc.
- [ASH NHS Long Term Plan webinar series](#) – Includes webinars on pharmacotherapy, smokefree mental health settings, partnerships, smoking during pregnancy, metrics, and NICE guidance.
- [BTS/Respiratory Futures Treating Tobacco Dependence project resources](#) – Resources to support planning, implementation and delivery of NHS tobacco dependence treatment services.
- [Smoking in Pregnancy Challenge Group](#) – Resources and information for healthcare professionals working to reduce rates of smoking before, during and after pregnancy.
- [Mental Health and Smoking Partnership](#) – Resources and information for healthcare professionals working to reduce smoking rates among people with mental health conditions.
- [National Centre for Smoking Cessation and Training \(NCSCT\) staff training resources](#) – Free, online training courses and briefings to support the implementation of tobacco treatment services.
- [CLear local tobacco control assessment](#) – The CLear self-assessment tools have been developed by the Office for Health Improvement and Disparities (OHID) to help local authorities, public health bodies and NHS organisations to improve their tobacco control work and implement NICE guidance on smoking.

Data and insight

- [OHID Local Tobacco Control Profiles](#) – Presents national, regional and local tobacco prevalence data.
- [ASH Ready Reckoner](#) – Shows the costs of smoking to society at national, regional, and local authority levels

Policy and guidance

- [NHS Long Term Plan](#)
- [2017 Tobacco Control Plan for England](#)
- [NICE Guidance \[NG209\]](#)
- [The Khan Review – Making Smoking Obsolete](#)