

Smoke and Vape-Free Premises

1. Introduction

The Providence Health Care (PHC) Smoke and Vape-Free Premises policy is guided by the Provincial and Municipal Governments of BC; Tobacco and Vapour Products Control Act and Regulations, which mandates smoke and vape-free health authorities.

Underlying Principles:

Commitment to health promotion and disease prevention

PHC is committed to supporting healthy lives in healthy communities.

Commitment to ensuring a healthy working environment

PHC is committed to ensuring a safe and healthy environment for patients, residents, staff, physicians, volunteers and the general public.

Duty to provide leadership in health-oriented policy

PHC provides leadership in its policy and practice that supports the achievement of high health standards.

Tobacco smoking is the leading cause of preventable deaths in Canada and scientifically identified as raising the risks of cancers, cardiovascular and lung diseases. The health care burden caused by tobacco use is not limited to the negative health effects on the smoker, but also includes the risk to non-smokers of being exposed to environmental tobacco smoke. Second-hand smoke is a carcinogen and there is no safe level of exposure.

Electronic cigarette has no long term safety data as yet although a growing body of research suggests that e-cigarettes may be hazardous and cause a negative impact on health, contributing to cancer, heart and lung disease. Testing has shown that various e-cigarette products contain and emit potential toxic chemical compounds, carcinogenic substances, metals, solvents, flavoring, in addition nicotine. It is considered an uncontrolled product since its composition and concentrations are variable and inconsistent. Labelling of the actual content is unreliable. It is marketed as a way to stop or cut down on smoking. The use of the flavored e-cigarette among the youth and non-smokers is soaring, bringing on additional concerns of easily moving to cigarette smoking and nicotine addiction. At this time e-cigarettes is not certified by the FDA as being safe and effective.

Smoking and vaping bans in public places are recognized as the most effective means for reducing exposure to second-hand smoke and vapour from e-cigarettes. The bans have shown to: decrease nicotine consumption, reduce serious health-related hospital admissions, increase the number of quit attempts, lengthen the time between periods of relapse, and boost quit rates.

Access to nicotine replacement therapy (NRT) is a key to helping anyone abstain from smoking. E-cigarettes are not approved as cessation aids.

1.1. Purpose

This policy articulates Providence Health Care's (PHC) commitment to ensuring a safe and healthy environment for patients, residents, staff, physicians, volunteers and the general public and supporting healthy lives in healthy communities by ensuring a smoke and vape-free premises.

1.2. Scope

The Smoke and Vape-Free Premises policy applies to all [staff](#), patients, residents, and the general public in or on all PHC owned and/or operated premises, facilities, grounds, parking lots and vehicles. Any person acting for or on behalf of PHC is required to comply with the Smoke and Vape-Free Premises policy.

1.3. Exceptions

The exception to this policy is traditional, ancestral, medicinal, and ceremonial use amongst First Nations, Inuit, and Metis Peoples.

2. Policy

Smoking of tobacco, cannabis, e-cigarettes or other vapour devices are prohibited in or on all PHC-owned and operated premises, facilities and grounds.

2.1. Medicinal Cannabis

If a patient, client or resident is using medically prescribed cannabis (i.e. they have a Government of Canada certificate for legal possession and use) they must:

- a) Leave PHC property and smoke in a location where they do not affect other people; **or**
- b) Use oral Nabilone, a formulary alternative for those patients who cannot leave the hospital to smoke their cannabis

2.2. Support

PHC will provide preventative and supportive measures to assist patients, residents, families, staff, and visitors, to adapt to smoke and vape-free premises.

Inpatients will be offered a variety of clinical supports for abstinence and cessation including access to smoking cessation products such as: nicotine patch, gum, inhaler, and prescription drugs, at no cost while under PHC care.

PHC employees who want to quit smoking can also access nicotine replacement therapy as a Staff benefit as provided by our extended health plans.

PHC will provide educational assistance to patients, residents, families, and staff.

PHC will not accept funding or monies or gifts in any form from a tobacco company.

All agreements with agencies of facilities funded primarily by PHC, where possible, will require the agency or facility to have a similar non-smoking and vaping policy.

PHC will provide leadership in the implementation of the Smoke and Vape-Free Premises Policy.

3. Responsibilities

Responsibility for this policy is shared between all PHC Staff, including all agencies contracted and/or funded by PHC, such as Security and Housekeeping.

3.1. Staff will:

- Inform patients and visitors on PHC premises of the Smoke and Vape-Free Premises Policy.
- Follow the “PHC Tobacco Dependence Management Guidelines” in the Shared Health Organization Portal (PHC SHOP).
- Promote nicotine withdrawal management and patient comfort while patient is under PHC care.
- Refer patients to appropriate smoking cessation assistance and support in hospital and upon discharge.

3.2. Leaders will:

- Support the Smoke and Vape -Free Premises Policy by allocating the required time, financial, human and other resources required for maintaining and enforcing this policy.
- Conduct regular walkabouts on PHC property and inform violators, patients, visitors, or staff of the Smoke and Vape-Free Premises Policy and provide support and brief intervention.

3.3. Departments/ Programs will:

- Implement smoking cessation strategies and follow the smoking cessation guidelines.
- Maintain and update smoke and vape- free premises signage.
- Provide nursing and other health care professionals with up-to-date information, education and training on smoking cessation and tobacco reduction.

3.4. Facilities Management will:

- Ensure that signage (indoor and outdoor) is maintained and well displayed.
- Remind staff of the Smoke and Vape-Free Premises Policy.

3.5. Housekeeping will:

- Monitor and clean all entranceways and hospital grounds on a daily basis for removal of cigarette butts, (including the 4th floor connecting walkway at SPH).

3.6. Security will:

- As part of regular routine perimeter security patrols, engage those found in contravention of the Smoke and Vape-Free Premises Policy and inform them of the boundaries of PHC premises.
- Request non-complying visitors to leave the PHC premises.

4. Compliance

4.1. Staff:

- Any staff member smoking either tobacco or cannabis, or vaping on PHC owned and/or operated premises, facilities and grounds will be subject to disciplinary consequences. Verbal warning will be given initially, with handouts regarding the policy, support available and the consequences of continued infractions. Further violations will result in additional disciplinary actions including suspension up to termination.
- Volunteers refusing to comply with the policy will be reported to the supervisor responsible for volunteer Services.
- On-site contractors refusing to comply with the policy will be reported to the Leader responsible for on-site construction /renovation projects. Penalties may be issued for non-compliance.

4.2. Visitors, patients, and residents:

- Visitors refusing to comply with the policy will be reported to Security and asked to leave PHC property.
- Patients and residents refusing to comply will be reported to Charge Nurse or Designate. Continued non-compliance will be reported to the responsible Physician.

5. Supporting Documents

5.1. Related Policies

[Cultural and Ceremonial Use of Tobacco and Smudging Medicines](#)
[Smoke-Free Premises \(VCH\)](#)

5.2. Guidelines/Procedures/Forms

Nicotine Dependent patient in Acute Mental Health-Care and Management of CPD N-125

VCH Staff Smoking on VGH Property Enforcement Plan

Health Protection Regional Tobacco Strategy VCH 2014

[Tobacco Dependence Management Guideline](#)

Nicotine Replacement Therapy (NRT) orders (PPO) PH242-RN (ChartScan)

Nicotine Replacement Therapy RNIA Preprinted orders PH242-RN (ChartScan)

[Referral Form to QuitNow Services](#) FAX 1-877-455-2233

Tobacco Consult form: VCH-PHC SC Fax to Quit Services

6. Definitions

“Staff” means all employees (including management and leadership), Medical Staff Members (including physicians, midwives, dentists and nurses), residents, fellows and trainees, health care professionals, students, volunteers, contractors, researchers and other service providers engaged by PHC.

“Electronic cigarette” commonly referred to as e-cigarette, electronic smoking device, vaporizer cigarettes, and vape pens, electronic nicotine delivery system or electronic non-nicotine delivery system. Its aim is to stimulate the feeling of tobacco smoking by the process of vaping.

“Vaping/ Vape” involves inhalation of vapourized e-cigarette liquid. Works by the battery operated device that heats the liquid to generate an aerosol (vapour) that the user inhales. The exact composition and concentrations of products in the liquid varies. Contains water, propylene glycol, generally includes nicotine, chemicals to vaporize nicotine, additives, flavoring and other unknown compounds and solvents.

“Cannabis”, also known as marijuana, is a psychoactive drug from the Cannabis plant, used for medical and recreational purposes.

7. References

All staff members are responsible for adhering to this policy and monitoring their activities in accordance with the policy. Staff members may warn others if they observe a violation of this policy. Failure by staff to comply with this policy may result in disciplinary action up to and including termination of employment, services or privileges.

- VCH/PHC Tobacco Dependence Management Guideline, VCH & PHC Professional Practice Feb 2014
- Tobacco and Vapour Products Control Act and Regulation BC Reg. 149/2016, September 1, 2016
- VCH Tobacco Reduction Program
- OMA 2008 Position Paper “Rethinking Stop-Smoking Medications: Treatment, Myths, Medical Realities
- City of Vancouver Health by law No. 9535
- Work Safe BC, OHS regulations section 4.81-4.83
- Ministry of Health services: Tobacco Control Programs : www.2gov.bc.ca
- Canadian Lung Association : www.lung.ca
- Health Canada : www.hc-sc.gc.ca/hc-ps/tobvac-tabac/res
- The British Columbia Lung Association : www.bc.lung.ca
- Oxford Academic University Press: Nicotine and Tobacco Research 2018, Society of Research on Nicotine
- JAMA Internal Medicine 2018, 178 (7), Public Health Consequences of E-cigarettes, July 2018
- Harvard Health Publishing, Harvard Medical School: National Youth Tobacco Survey, November 8, 2016, Dr. Claire McCarthy MD.

- Medical News Today: Are E-Cigarettes a Safe Alternative to Smoking, Yvette Brazier, June 25, 2018

8. Appendices

There are no appendices to include with this policy.

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