

# STANDARD OPERATING PROCEDURE FORENSIC - E-CIGARETTES

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<b>Ratified and Quality Checked by: Date Ratified:</b>	Director Sign-off (Paula Phillips) 4 August 2023
<b>Name of Trust Strategy / Policy / Guidelines this SOP refers to:</b>	N/A

**VALIDITY – All local SOPS should be accessed via the Trust intranet**

## CHANGE RECORD

Version	Date	Change details
1.0	January 2019	New SOP
1.1	25 <sup>th</sup> February 2019	Areas of use made more clear (Section 4.3) Approved Clinical Network 11-Feb-19 and CRMG 25-Feb- 2019
1.2	19 <sup>th</sup> August 19	Action in the event of 'excessive' use (Section 4.3)
1.3	23 <sup>rd</sup> March 2022	Review no changes – Approved Clinical Lead (P Boden)
1.4	4 August 2023	Reviewed. No changes, as deemed fit for purpose – with a plan to review again when process changes. Approved by Paula Phillips sign-off (4 August 2023).

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## 1. INTRODUCTION

E-cigarettes are battery powered devices that deliver nicotine through inhaled vapour. Most e-cigarettes contain a heating element, a cartridge containing nicotine, glycerine and water.

The aim of this procedure is that patients who choose to smoke will be able to purchase, use and dispose of e-cigarettes effectively.

This SOP applies to all patients, and as such constitutes a blanket restriction. It is supported by Trust procedures and is an agreed blanket restriction as part of a nationally driven agenda.

This procedure must be read in conjunction with the Trust E-cigarette procedure.

## 2. SCOPE

This SOP applies to staff and patients in low and medium secure services of the Trust.

## 3. DUTIES AND RESPONSIBILITIES

Review of SOP – Clinical Network, at least every three years.

Implementation of SOP – Ward Charge Nurses.

Adherence to SOP – all service staff.

## 4. PROCEDURES

### 4.1. Equipment

- The Humber Centre will use the 'e-burn' e-cigarette – [<https://e-burn.com/>] which has been designed for use in secure custodial and care settings. Each has a unique serial number. Each contains a lithium battery.
- No other model / type will be used.
- E-cigarettes will be dispensed from a vending machine, located in the cafeteria. This vending machine is for patient use only.
- No other source of procurement will be permitted. No e-cigarettes of any model will be allowed to be given to patients by any means (e.g. visits, postal packets, on S17 leave, etc.).

### 4.2. Purchase

- All purchases of e-cigarettes must be completed by the patient. Any patient who cannot access the cafeteria in order to complete the necessary purchase must be considered for alternative smoking support – i.e. Nicotine Replacement Therapy (NRT).
- Staff will not, under any circumstance, use the vending machine on behalf of a patient, or for personal consumption.
- Patients can only be in possession of one e-cigarette at any time. They may purchase more than one at any time, but additional e-cigarettes will be stored securely and managed as a controlled item on the ward.
- Patients cannot make purchases for other patients.

#### 4.3. Use

- E-cigarettes will only be used in patient bedrooms or external courtyards (including the seclusion area courtyards, subject to individual risk assessment and the patient being able to purchase in person – see 4.2 above).
- E-cigarettes will not be used in the large secure garden, or in the Swale or Ullswater secure gardens (Department of Health, 2011).
- E-cigarettes can be used on leave, but NOT in service vehicles. Use while on leave is subject to any local permissions / rules re the use of e-cigarettes. Any 'used up' e-cigarettes must be returned to the unit for recorded disposal.
- E-cigarettes will not be used in communal areas or during individual or group therapy / activity.
- Any deviation from the approved use will be reviewed as a clinical matter, and any necessary consequent clinical intervention will be robustly recorded with a set review schedule.
- E-cigarettes will not be available to patients in seclusion unless risk assessed and care planned, as with any other risk items. NRT may be considered as an alternative during an episode of seclusion.
- Each e-Burn e-cigarettes delivers the nicotine equivalent of 30 cigarettes. Any patient who is identified as using more than two e-cigarettes per day will be supported in addressing this level of use by means of an individualised reduction plan which may, subject to MDT consideration, include the application of daily limits to purchase and consumption (this should not be the primary intervention; there should, wherever possible, be a collaborative approach to consumption reduction).

Similarly, any patient who is identified as prioritising e-cigarette use over any offered / planned therapeutic intervention should be reviewed in a similar way, possibly by means of an individualised plan.

Any intervention that may be aimed at reducing / limiting consumption must include consideration of capacity and best interests.

#### 4.4. Disposal

- E-cigarettes will be disposed of in the designated bin, located next to the vending machine. This bin will be removed and replaced by the vending machine contractor.

#### 4.5. Monitoring / Recording

- E-burn e-cigarettes will be classified as a 'controlled item'. Any other model / type will be classified as a 'contraband item'.
- A monitoring sheet will be maintained for all patients using e-cigarettes to record the purchase and disposal of every e-cigarette.

## 5. REFERENCES

E-cigarette Procedure (HTFT, 2019)

Environmental Design Guide - Adult Medium Secure Services (DoH, 2011)

## Appendix 1: Information leaflet

A leaflet has been devised based upon the Trust leaflet, but made specific to the service.

It is stored in the Procedures Folder as a Microsoft Publisher document, title;

FPC 014 E-Cigarettes Patient & Carer Leaflet (date)





