

OP19 Smoking, Alcohol and Drugs

**1. Policy Statement**

1.1 It is the policy of Shared Lives South West (SLSW) to ensure that all staff, Shared Lives carers, volunteers, and people supported have the opportunity to live and work in a smoke-free environment and receive advice and support, where necessary, to achieve this. This policy promotes a healthier, safer, and more inclusive environment for everyone involved in Shared Lives arrangements.

**2. Procedure**

2.1 SLSW aims to achieve the highest possible standards of health, safety, and wellbeing. Understanding legislation and policies relating to smoking, alcohol, and drugs is essential in maintaining these standards.

2.2 Information and advice about the effects of smoking, alcohol, and drug use on health and wellbeing is well documented. Awareness of the law and its practical implications is necessary to safeguard everyone in Shared Lives arrangements.

2.3 Decisions made by, or on behalf of, people supported about smoking, alcohol, or illegal drugs must be in line with the Mental Capacity Act (MCA) and, where applicable, Best Interests (BI) decision-making.

2.4 This policy aims to raise awareness and provide guidance on how to address issues related to smoking, alcohol, and drugs within Shared Lives arrangements, thereby fostering a safer and healthier environment for all.

**3. Smoking**

3.1 Under UK smoke-free legislation, smoking is banned in virtually all enclosed public places and workplaces due to the risks of passive smoking.

3.2 Although private dwellings are exempt from this legislation, Shared Lives carers must consider the potential health and fire risks associated with smoking.

3.3 All necessary steps to reduce risks from smoking, passive smoking, and fire hazards must be documented in:

- The individual's support plan
- Placement/Respite Agreement
- Health and safety checks
- Reviews
- Risk assessments

3.4 If either the Shared Lives carer or the person supported smokes, the

matching process will take this into account.

3.5 These discussions must take place at the beginning of the matching process to ensure appropriate arrangements are agreed.

3.6 The choices of both Shared Lives carers and people supported regarding smoking must be respected.

3.7 Considerations should include:

- Agreed safe areas for smoking
- Safe disposal of cigarettes
- Safety and health of others
- Fire risk and hazard
- Smoking in vehicles
- Access to support to quit smoking

3.8 SLSW has a general duty of care to protect staff, carers, and people supported from the risks of passive smoking.

3.9 SLSW staff should not be exposed to smoking during visits. If smoking continues during a visit, the staff member has discretion to end the visit. All SLSW premises are smoke-free, and workers must not smoke in carers' homes.

3.10 Shared Lives carers must take reasonable steps to protect the health of those they support. Failure to do so may lead to a review of their approval status and potentially legal consequences.

3.11 Further resources:

- <https://www.nhs.uk/live-well/quit-smoking/>
- Local Stop Smoking Services via GP or NHS website

#### **4. Vaping and E-Cigarettes**

4.1 Vaping and the use of e-cigarettes are not covered by smoke-free legislation in the same way as tobacco smoking. However, Shared Lives South West (SLSW) recognises that vaping may still pose health risks and can impact others in a Shared Lives arrangement.

4.2 Although often promoted as a tool to help people stop smoking, the long-term health effects of vaping are still being researched. Therefore, a cautious approach should be taken when considering vaping in Shared Lives placements.

4.3 Shared Lives carers, people supported, and staff should discuss the use of e-cigarettes during the matching process and agree on expectations and boundaries as part of the placement planning.

#### 4.4 Considerations should include:

- Whether vaping is permitted indoors or restricted to designated areas
- Respect for the preferences of others in the household
- Use around people with respiratory conditions or sensitivities
- Safe storage of vaping devices and liquids (especially where children or vulnerable adults are present)
- Fire risks associated with charging or using devices
- Access to support for people wishing to quit vaping

4.5 As with smoking, SLSW staff should not be exposed to vaping during home visits. Staff may exercise discretion to end visits if vaping is taking place in their presence.

4.6 Carers have a duty to promote the wellbeing of the people they support. Excessive or inappropriate use of e-cigarettes, or enabling use in ways that may be unsafe or disrespectful to others, may lead to a review of the Shared Lives arrangement.

4.7 Information about vaping and stopping nicotine use can be accessed through NHS support services:

- <https://www.nhs.uk/better-health/quit-smoking/>

## 5. Alcohol

5.1 The NHS recommends not exceeding 14 units of alcohol per week on a regular basis.

5.2 All parties in Shared Lives arrangements should understand the potential physical and mental health effects of alcohol.

5.3 Problematic alcohol use can affect health and disrupt Shared Lives placements.

5.4 Issues to review may include:

- Behavioural changes due to alcohol
- Excessive alcohol consumption
- Impaired awareness of alcohol intake
- Need for supervision around alcohol
- Physical and mental health risks
- Drinking patterns
- Support services and groups
- Professional healthcare advice
- Access to treatment and support

5.5 Concerns about alcohol use should be discussed with the Shared Lives worker for assessment.

5.6 If concerns are justified, actions may include:

- Reviewing risk assessments and management plans
- Reviewing support plans and Placement/Respite Agreements
- Providing tailored advice and accessible information
- Accessing appropriate support services for the carer and/or person supported
- Assessing capacity under MCA and considering Best Interests decisions

## 6. Drugs

6.1 Everyone in Shared Lives must understand the dangers and legal implications of using non-prescribed drugs.

6.2 Illegal drug possession or distribution is a criminal offence under UK law.

6.3 Some individuals may be prescribed medication, which may be self-administered or supported by Shared Lives carers.

6.4 Controlled substances such as methadone, used in recovery programmes, must be managed under professional supervision.

6.5 Substance use can impair performance. Effects may include:

- Poor concentration
- Reduced care and attention
- Drowsiness
- Distraction
- Irritability
- Poor functioning
- Inability to assess risk
- Hyperactivity

6.6 All individuals involved in Shared Lives must carry out their roles responsibly and in accordance with this policy.

6.7 Any concerns about illegal drug use must be reported immediately to the Shared Lives worker and, if necessary, to the police. Safeguarding Adults procedures will be followed.

6.8 SLSW recognises that individuals may use illegal substances and will provide harm reduction support, while reinforcing that such behaviour is unacceptable within Shared Lives placements.

6.9 If a worker or volunteer is under the influence of alcohol or drugs while working, this will lead to investigation and possible disciplinary action. Support and information will be offered.

6.10 If a Shared Lives carer is found to be under the influence of alcohol or drugs to the extent of being incapacitated, alternative arrangements for the individual(s) they support will be made immediately.

6.11 Depending on the investigation outcome, this may lead to the removal of the carer's approval status.

## **7. Review**

7.1 This policy will be reviewed every three years, or earlier if needed, to ensure compliance with legislation and best practice.

## **8. Responsibilities**

8.1 The Registered Manager has overall responsibility for the implementation of this policy.

## **9. Related Policies**

- Safeguarding Adults Policy
- Mental Capacity Act and Best Interests Policy
- Health and Safety Policy