



THE MORAY COUNCIL SMOKING POLICY Placement Services

Aims of this policy

1. To promote and protect the health of children who are Looked After and Accommodated and living with
 - (i) Foster Carers
 - (ii) Placed with prospective adopters

2. At the same time ensure that a wide choice of placement options remains viable and available to meet the care needs of children and young people.

It must be noted that whilst this policy does not specifically apply to children in kinship care placements or supported lodgings placements, the advice around smoking should be shared with providers of these placements in the interests of safeguarding children and young people's health.

National Policy Background

In January 2004 the Scottish Executive launched "A Breath of Fresh Air for Scotland" setting out a programme for action covering prevention, education and protection and which addressed the issue of passive smoking. This led to the Smoking, Health & Social Care (Scotland) Act 2005 which came into force in March 2006, with a ban on smoking in enclosed public places in Scotland.

This policy applies to the placing of looked after children in foster care or with prospective adopters. BAAF issued a practice note in 2007, "*Reducing the Risks of Environmental Tobacco Smoke for Looked After Children and their Carers*". This practice note makes a number of recommendations, many of which are reflected within this policy.

The Effects of Environmental Tobacco Smoke in Children

There are both immediate effects and longer term effects caused by second – hand smoke.¹ Breathing other people's smoke is called passive or second hand smoking. Tobacco smoke contains over 4000 chemicals in the form of particles and gases, and as such is identified as a major source of indoor

pollution. Unlike adults, children have little choice whether or not to be in a smoky environment. A child will breathe both the “side stream” smoke from the burning tip of a lit cigarette, and also the “mainstream” smoke that has been inhaled and exhaled by a smoker. Nearly 85% of the smoke in a room results from side stream smoke.

The increased risk to children brought up in a smoking household have been summarised below: -

- Infants of mothers who smoke are almost 5 times more likely to be at risk of cot death
- Increased risk of pneumonia and bronchitis in pre-school children
- Increased risk of developing asthma and respiratory infections, and where asthma is already established, an increase in severity will occur in smoking households
- A 20-40% increased risk of glue-ear

Implications for Looked After Children

Many of our looked after children are already vulnerable and are likely to have suffered poor health prior to being accommodated.

The effects of passive smoking are cumulative over time, and even low levels of exposure subsequently might have long-lasting effects on their health.

Consistent with the Scottish Government Getting it Right for Every Child, (GIRFEC) approach to improving outcomes for all young people, as a corporate parent, the Moray Council must safeguard the looked after children and young people from exposure to second-hand smoke within placement settings, which would be consistent with the wellbeing indicators: -

- safe – from abuse, harm or neglect
- healthy – supported to make healthy choices

Given the increased research and knowledge about the negative effects that smoking can have on the health of a child, placement services has extended its guidance on smoking to ensure that the risks to looked after children and young people are minimised. With reference to Aberdeen City and Aberdeenshire’s policies on smoking and in consultation with health services and with a working group of 3 foster carers 1 of whom smokes this extended policy has been produced.

Any looked after child who goes on to develop a smoking related disorder in later life may question why they were knowingly placed in a foster or adoptive home where the carers were people who smoke.

General Principles and Context

1. All children and young people are entitled to live in a smoke free environment.

2. Foster carers and prospective adopters are required to proactively discourage children and young people from smoking and to promote positive health.
3. Foster carers and prospective adopters who smoke must not do so within their home or car or in any enclosed environment where children might be present.
4. Children under the age of five will not be placed with adopters who smoke.
5. Generally children under five years of age will not be placed with Foster carers who smoke other than in exceptional circumstances and with specific conditions agreed at the outset e.g. if an older sibling is placed and the needs assessment reflects that the children should be placed together.
6. For the purposes of decision making about placements applicants offering temporary or long term placements must have been non-smokers for at least one year before placing of children under 5 will be considered. Carers offering short breaks for children must have been non-smokers for at least 6 months.
7. Where children of any age are known to have respiratory conditions, heart disease or disabilities that limit their activities or movement they will not be placed with Foster Carers or adopters who smoke.
8. Existing foster carers and prospective adopters who continue to smoke will be proactively encouraged to stop smoking and this will be a standing agenda item at foster carer reviews. The Placement Services team will make available or direct carers towards, information on how to stop smoking. E.g. *Smoke-Free Homes* is a National initiative aimed at reducing the impact of second-hand smoke (passive smoking) on children and families by encouraging parents/carers to create a smoke-free home and car. Links will be encouraged through information and training sessions with local NHS initiatives around smoking cessation. Evidence shows that people are four times more likely to successfully quit smoking when using local NHS services combined with stop smoking medicines. ²
9. Carers' preparation sessions will include input on this policy and on all risks to both children and adults associated with smoking.
10. Foster carers must not buy cigarettes for children or young people of any age.
11. Cigarettes should never be used as a reward for good behaviour.

12. Foster carers and prospective adopters will be required to sign a specific agreement as below. This will have particular relevance for prospective adopters who may have a child initially placed with them under fostering regulations.

Gold commitment

- Carers and all adults of the household are non-smokers.
- The home and car are completely smoke free at all times.
- All those visiting the home that smoke must smoke outside and if possible, not in front of children and young people.
- Carers should actively discourage children and young people from smoking.
- Young people who smoke must smoke outside.

Silver commitment

- The home and car are completely smoke free at all times.
- Carers and all those visiting the home that smoke must smoke outside and if possible, not in front of children and young people.
- Carers should actively discourage young people from smoking.
- Young people who smoke must smoke outside.

Foster Carers and prospective adopters should confirm their commitment to one of the above, which in turn will impact on their potential approval. The feedback from the carers who were part of the working group is that they view these commitments positively and they should be a standing item at all foster carer reviews.

It is acknowledged that people who smoke can and do still care successfully for children and young people, but the health of the child is foremost and consequently children should be provided with a smoke free environment.

E cigarettes

The use of E cigarettes as an aid to giving up using tobacco products is a relatively new development.

The Fostering Network jointly with Action on Smoking and Health (ASH) Scotland produced a briefing paper in July 2014 which focused on the use of E cigarettes and from this produced a position statement in September 2014 which stated that: -

“Whilst current research evidence suggests that the use of electronic cigarettes is effective in helping people to stop using traditional tobacco cigarettes, there is little to suggest that it is encouraging smoking. The Fostering Network considers the current research evidence provides no compelling reasons for restricting the use of e-cigarettes. Therefore foster carers should not be prevented from fostering or applying to foster because of their use of e-cigarettes.

However we advise it is good practice not to use them in front of children and young people until more evidence is gained about the role modelling effect of this on the smoking behaviour children more generally.”³

The Moray Council placements services would endorse the above and whilst would not consider the use of these devices to prevent any applicant becoming a foster carer we would expect that their use is restricted around children.

1. BAAF Practice Note 51 Reducing the risks of environmental tobacco smoke for looked after children and their carers. 2007
2. Ash Scotland - Report on the mapping of existing tobacco control policies within looked after and accommodated children and young people(LAACYP) services in Scotland May 2014
3. The Fostering Network position statement - joint briefing paper by ash Scotland and TFN Foster Care Adoption and electronic cigarettes. July 2014

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