

**Fostering Service  
Smoking and E – Cigarette  
Policy**

**November 2022**



# Smoking and E-cigarettes

## Introduction

The health and wellbeing of children is paramount, and the Government wants children to be protected from the harmful effects of smoking. The Government smoking ban came into effect in England in July 2007 and made it illegal to smoke in a public place, although some places were excluded such as prisons, care homes and psychiatric units. Foster Carers provide care in their own home, which is not regarded as a workplace, however, this ruling must be considered alongside every child's right to live in a smoke free environment. Following reports in the early 1990's from the Royal College of Physicians and the Chief Medical Officer's Expert Group on Cot Deaths, there was sufficient evidence for the Department to be concerned about the effect of passive smoking where babies and very young children were being placed with families who smoke.

The risks of passive smoking to health, particularly children's health, are well known. A recent study by the BMJ suggested that the only way to reduce children's exposure to passive smoking is to maintain a smoke free home. Other measures such as restricting smoking in the vicinity of the child or using fans or open windows to ventilate a room where smoking has taken place are ineffective (Blackburn et al 2003) The other health risks associated with smoking include poisoning and increased risk of fire.

There are additional risks to the child if they are placed long term in a smoking household. Long term exposure to passive smoke poses a significant risk of ill-health that increases with time and low levels of exposure are still harmful. More than 80% of second -hand smoke is invisible and odourless.

While many children and young people will experiment with smoking by the age of 16, this can be reduced or avoided if they:

- Have information on the dangers of smoking
- View 'not smoking' as the cultural norm
- Have positive role models who do not smoke
- Can access emotional and practical support when they want to stop smoking

Those living with care givers who smoke are more likely to take up smoking themselves and it is important that Foster Carers have access to information on the dangers of smoking and passive smoking, as well as the impact on the health of everyone living in the household.

The National Institute for Health and Care Excellence (NICE) recommends that smokers are offered alternative sources of nicotine such as licenced NRT products or an e-cigarette to help them quit smoking. E-cigarettes may be used to help maintain a smokefree home. Where carers or other family members are using e-cigarettes to abstain from smoking, they should be advised to avoid vaping in front of children (of all ages) to avoid role modelling vaping behaviour. Electronic Cigarette equipment and liquids should be stored safely out of reach of children. Ideally foster carers will not be using electronic cigarettes.

## Regulations and Standards

The Fostering Services Regulations (England) 2011 require the health of the prospective foster carer to be considered and while the Regulations do not ban smoking, this is something that will need to be considered during the recruitment and assessment process.

The Fostering Services (England) Regulations 2011

[Regulation 15 - Health of children placed with foster parents](#)

Fostering Services: National Minimum Standards

[STANDARD 6 - Promoting good health and wellbeing](#)

All fostering services have their own policies in relation to smoking which consider the impact on the health of any children that will be placed and the importance of foster carers as role models for young people in care.

Bolton's policy is that no child under the age of 5 will be placed with carers who smoke or are ex-smokers unless they have stopped smoking for at least 12 months. Neither will a child of any age, who has a history or identified risk of medical conditions exacerbated by cigarette smoke such as middle ear or respiratory infections, asthma or bronchitis be placed with carers who smoke. Where a child has come from a non-smoking household they should be matched with a non-smoking household. A child should never be moved to a placement that poses greater health risks than their current circumstances. Commitment to cessation of smoking should be monitored through foster care and medicals and annual reviews. Bolton's policy is consistent with advice from CoramBAAF and Fostering Network and evidenced by current research.

## Fostering Households

If the child is under the age of 5 years old the following process will be followed:

Where a placement of a child **under the age of 5** (or those with "at risk" health conditions) in a smoking household is seen as being in the child's interests, for example, if a child is being placed with a **relative/connected person**, the additional health risks to the child of being placed in a smoking household need to be carefully balanced against the benefits of the placement for the child. The following process will be followed:

- There should be a written agreement signed by all those involved in the decision, and this should be recorded on the carer and child's electronic file.
- Applicants must evidence their commitment to cease smoking and engage in a plan of smoking cessation as soon as the child is placed.
- It will then be part of the role of panel to test and challenge that evidence in weighing up whether approval is appropriate or not. Evidence of smoking cessation needs to be long and consistent enough to assure panel it is the applicants' intention to stop smoking.
- Approval can then be given on the condition that any evidence in regard to them resuming smoking will call for an early review of that approval and possible deregistration.

If the child is over the age of 5 years old the following process will be followed:

- There should be a written agreement signed by all those involved in the decision, and this should be recorded on the carer and child's electronic file.
- The agreement must include the arrangements about where smoking will take place, for example, outside and away from the home.
- Members of the household who smoke will be required to give an undertaking not to smoke in any room where the child is cared for.
- Members of the household, visitors or support carers who smoke, must comply with the above and any other relevant legislation (e.g., ban on smoking in cars if accompanied by 'anyone under the age of 18').

## **Children who Smoke**

It is illegal for retailers to sell tobacco to anyone under the age of 18, and no adult should buy or give children or young people cigarettes. Foster carers should be given appropriate support and guidance to address the smoking behaviour of children in their care, including enabling them to access specialist support to quit from healthcare professionals. Vaping is not a recommended substitute to smoking for children under age 18 and children who are vaping should be supported, with advice from healthcare professionals, to use licensed nicotine replacement therapies instead.

Advice on stopping smoking is available from a number of sources, such as NHS website (<https://www.nhs.uk/better-health/quit-smoking/>), local Pharmacy, the applicant's GP and CoramBAAF's guidance on the risks of environmental tobacco smoke for looked after children and their carers

**Updated by Shirley Jennings November 2022**