

SMOKING IN PUBLIC PLACES:

Guidance for owners and managers of places visited by the public

Department of the Environment, Department of Health, Employment Department, Welsh Office, Scottish Office and the Department of the Environment for Northern Ireland

CODE OF PRACTICE

#### BACKGROUND

The Government recognises that people are entitled to breathe air unpolluted by tobacco smoke and believes that non-smoking should be the norm in buildings frequented by the public, with special provision for smoking where appropriate. We believe there are real advantages if this can be achieved as far as possible by non-statutory means. This Code of Practice sets out the background to the Government's policy on smoking in public places and the best means of achieving the goal of a smoke-free environment.

# Why non-smoking should be the norm in public places:

- People are entitled to breathe air unpolluted by tobacco smoke.
- · Passive smoking can be hazardous to health.
- Environmental tobacco smoke causes discomfort and pervades hair, clothing and furnishings.
- · The majority of the population are non-smokers.
- · There is growing public demand for smoke-free areas.
- Ventilation alone does not adequately protect against the effects of environmental tobacco smoke.





#### WHAT IS PASSIVE SMOKING?

Passive smoking means breathing other people's tobacco smoke. Tobacco smoke is generated whenever a cigarette, pipe or cigar is smoked, and where smoking occurs, in homes, public places or nonindustrial work-places, it is likely to be the major source of indoor pollution. The socalled main-stream smoke is that which is purposely inhaled, some then being exhaled by the smoker. The side-stream smoke (which makes the main contribution to the smoke in a room) comes straight from the burning tip of the cigarette, pipe or cigar.

WHAT IS IN TOBACCO SMOKE? There are two main phases (or components) of tobacco smoke, the particulate phase (small droplets of "tar"

#### **GOVERNMENT POLICY**

The Government has accepted the advice of the Independent Scientific Committee on Smoking and Health (published in the Froggatt Report) that 'non-smoking should be regarded as the norm in enclosed areas frequented by the public or employees, special provision being made for smokers rather than vice versa'. The Government is committed to creating a non-smoking environment, with facilities where appropriate for those who wish to smoke, by encouraging suitable policies on smoking in public places. The guidance in this Code of Practice is intended to help achieve this objective. Adoption of such policies by the United Kingdom will contribute to the implementation of the European

Community mixed resolution on smoking in public places which seeks to mitigate the adverse effects of passive smoking.

### WHO IS THIS GUIDANCE FOR AND WHAT DOES IT COVER?

his Code of Practice is for everyone who has responsibility for managing the indoor environment of buildings frequented by the public. It suggests how exposure of the public to environmental tobacco smoke can be minimised, and provides guidance on suitable smoking policies for public places.

#### **VENTILATION IS NOT ENOUGH**

herever smoking is allowed, good ventilation will certainly





reduce its effects. But, as concluded in the Froggatt Report, ventilation alone does not provide adequate safeguards against exposure to environmental tobacco smoke. This is why non-smoking should be the norm, with smoking allowed only in specially provided areas or rooms.

# WILL THESE RESTRICTIONS ON SMOKING BE WELCOME?

Experience has shown that when sensible smoking policies are introduced, the majority of people, smokers as well as non-smokers, are happy to comply. Surveys repeatedly show that most people accept that unrestricted smoking is no longer acceptable in enclosed public places. We are convinced that most

people will welcome this guidance and take action to implement its recommendations.

#### PRACTICAL GUIDANCE

The policy to be adopted depends in part on the reason the public are visiting the building, as set out below.

# Places the public attend out of necessity (or to receive a service)

The following are examples of places where people have to go in the course of their everyday business. The policy here should be to ban smoking altogether, especially where people are not expected to stay long.



Shops, supermarkets, shopping malls, discount warehouses, DIY outlets.



### **Advice/Money Transactions**

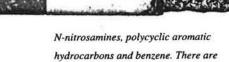
Town halls, citizens' advice bureaux, gas/electricity showrooms, banks, building societies, post offices.



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containing nicotine) and the gas/vapour phase, containing such chemicals as carbon monoxide, nitric oxide, ammonia, hydrogen cyanide and acrolein. Tobacco smoke also contains small amounts of some substances which have been shown in laboratory tests to induce cancer in animals; these include a range of





N-nitrosamines, polycyclic aromatic hydrocarbons and benzene. There are considerable differences in the concentrations of some of these components between main-stream and side-stream smoke.



#### Trave

B us and railway station waiting rooms, buffets, ticket offices/ foyers, motorway service stations.



Hospitals (patients and visitors), including outpatients' clinics, cafeterias, etc., doctors'/dentists' waiting rooms, residential homes, day centres, health clinics.

#### Education

Schools, nurseries, colleges, universities, lecture halls/theatres, libraries, exhibition/conference centres.



In circumstances where the public are likely to remain for a long time, e.g. airport departure lounges, or in places where people may experience a high degree of stress or anxiety, a separate smoking area or room should be provided.

Smoking should not be allowed in eating, drinking and recreation areas





within buildings. Separate smoking areas or rooms may be provided for those who do wish to smoke.

# Places the public attend out of choice

Included here are places people go for social reasons, including eating, entertainment and recreation.
For example:



#### Food/Entertainment

Restaurants, cafes, hotels, motels, inns, pubs, bars, cinemas, theatres, social clubs.



#### **Education**

Museums, art galleries, exhibitions.

Sport/Recreation

Sports clubs, sports centres, swimming baths, community centres, betting shops.

In places such as these, implementation of a smoking policy is at the discretion of the manager of the facility, but in all cases the Government expects efforts to be made to cater for the interests of the non-smoker. In particular:

Owners and managers of hotels, guest houses, etc., are encouraged to consider having smoke-free bedrooms and offering guests the choice of smoking or non-smoking accommodation. In pubs and bars, managers and owners should consider ways of encouraging people who do not wish to inhale environmental tobacco smoke to visit the premises. In larger premises this





# THE HEALTH EFFECTS OF PASSIVE SMOKING

#### Lung Cancer

Independent scientific bodies throughout the world have concluded that passive smoking can be a significant cause of lung cancer in non-smokers. This view is based largely on results of studies of individuals whose passive exposure to tobacco smoke is frequent, prolonged and intense (e.g. people whose partner is a heavy smoker). In March 1988 the Independent Scientific Committee on Smoking and Health published its review of all the available scientific evidence (the Froggatt Report). It concluded thatt 'the findings overall are consistent with there being a small increase in the risk of lung cancer from exposures to environmental tobacco smoke, in the range of 10-30% ... [which] might amount to

can be done by introducing smoke-free rooms or bars.

- Many cinemas and theatres already have totally or partially smoke-free auditoria; managers and owners of such premises should extend such arrangements to foyers and any bars and restaurants.
- To be consistent with the health aims and intentions of the participants, sports and leisure centres should be totally smokefree.

# Places catering for young

### people

Smoking should be prohibited in all public places frequented by

children and other young people. Such facilities include sports halls, youth clubs, community centres and "fast-food" and other restaurants appealing specifically to youngsters.

# Government and local authority offices; health service premises

Government departments and local authorities will receive separate guidance on the provision of non-smoking facilities. The Health Departments will issue updated guidance on smoking policies for hospitals and other health service premises.





#### **ADDITIONAL ADVICE**

# Setting up rooms or areas for smoking

reas and rooms are not ▲ Synonymous in this context. A 'room' is taken here to mean an area enclosed by solid floor-to-ceiling partitions whereas an 'area' may simply be part of a larger space with only limited physical separation. Essentially, larger premises which opt to make provisions for smoking should do so by providing a separate room. This may be impractical for smaller premises and the choice then is to be completely non-smoking or to provide suitable smoke-free areas (according to the type of premises, as described in Practical Guidance above).

Where separate smoking rooms cannot be provided and the room is to be divided into smoking and non-smoking areas, the standard of ventilation and/or air filtration and the location of the smoking area are most important. Provision of smoking and non-smoking areas in the same room will reduce peak exposure concentrations for non-smokers, but this alone is not effective in reducing overall exposure to tobacco smoke.

# Ventilation of smoking areas and rooms

A ventilation rate of eight litres per second (30m³/hour) of outdoor air per person is usually adequate for non-smoking rooms. But where smoking is allowed this rate must be three to four

times greater to avoid acute irritating effects even in healthy people.

In small rooms that are naturally ventilated, air cleaning devices can contribute to some improvement in air quality, although the performance of such devices can deteriorate over a short time. In large and mechanically ventilated rooms, dilution of tobacco smoke by increased ventilation is the preferred solution. In these circumstances, heat recovery measures should be considered to reduce the energy penalty of increased ventilation. Air contaminated with tobacco smoke should not be recirculated; separate smoking rooms set up in air-conditioned buildings, for example, should be separately vented to the outside.





several hundred out of the current annual total of about 40,000 lung cancer deaths in the UK ... '. In the light of such evidence the Government considers it necessary to help people reduce their exposure to tobacco smoke wherever possible.

#### Other illnesses

There is evidence that children frequently exposed to tobacco smoke (e.g. whose parents are smokers) are more prone to respiratory infections and symptoms such as wheezing. Passive smoking may also contribute to chronic middle-ear disease in children. There is some indication that women who are heavily exposed to tobacco smoke during pregnancy may have lower birthweight babies. The Froggatt Report concluded that by enhancing the frequency or severity of childhood respiratory

Further detailed advice on ventilation may be obtained from the Building Research Establishment (see Further Information).

# Smoking permitted

#### **Notices**

Totices clearly distinguishing L N between smoking and nonsmoking areas and rooms should be displayed in all public places. Areas where smoking is allowed as well as smoke-free areas should be declared by use of such notices. Also, where appropriate, details of the smoking policies adopted in the premises should be clearly displayed at the entrance. Suitable signs and

information packs outlining the reasons for, and benefits of, implementing smoking policies can be purchased from agencies such as ASH (Action on Smoking and Health) and the health education/promotion agencies (see Further Information).

#### Other important considerations

Tn creating separate smoking areas, Lemployers should consider the effects on staff who work in those areas. It is important that smoking policies which protect the public from passive smoking also protect nonsmoking employees, who should not be required to work in smoky environments. Equally, employers must consider the effect on smoking staff of a complete ban and either





provide separate facilities for such staff or introduce the policy in such a way as not to infringe employment rights. Advice on passive smoking at work can be obtained from the Health and Safety Executive and the health education/promotion agencies.

### **Further recommendations**

In cases where the public pay an entrance fee, non-smoking can be made a condition of entry if the manager or owner considers that smoking should be completely banned. Wherever a total ban is considered appropriate, no-smoking signs should be prominently displayed at the entrance to the premises, thereby clearly indicating management policy.

There are various schemes for promoting no-smoking policies in catering premises. Anyone wishing to participate should contact their local environmental health officer to see if the local authority operates such a scheme. Full details are obtainable from the health education/promotion agencies and the Institution of Environmental Health Officers (see Further Information).

#### **NEXT STEPS**

To be successful the voluntary approach requires a positive response by all those with a role to play. In particular, owners and managers of public places are encouraged to conduct consumer research into the demand for smoke-free areas and to respond positively to

the outcome of such surveys. For its part, the Government will monitor with interest the success of this initiative.

#### **FURTHER INFORMATION**

The following organisations can be contacted for further information about all issues to do with passive smoking.

#### ASH

### (Action on Smoking and Health)

109 Gloucester Place London W1H 3PH Tel 071-935 3519 Fax 071-935 3463

ASH Scotland 8 Frederick Street Edinburgh EH2 2HB Tel 031-225 4725 Fax 031-220 6604





the development of respiratory disease in adult non-smokers.

Passive smoking has been shown to have a severe and damaging effect on those with existing respiratory conditions such as asthma. Tobacco smoke can irritate the eyes, nose and throat of those exposed to it. **ASH** Northern Ireland

Ulster Cancer Foundation

40-42 Eglantine Avenue Belfast BT9 6DX

Tel 0232 663281 Fax 0232 660081

### Institution of Environmental Health Officers

Chadwick House Rushworth Street London SE1 0QT Tel 071-928 6006 Fax 071-261 1960

# Health Promotion Authority for Wales

Floor 8
Brunel House
2 Fitzallen Road
Cardiff CF2 1EB
Tel 0222 472472 Fax 0222 480851

#### **ASH** Wales

372A Cowbridge Road East Cardiff CF5 1HF Tel 0222 641101 Fax 0222 641045

#### **Health Education Authority**

Hamilton House Mabledon Place London WCIH 9TX Tel 071-383 3833 Fax 071-387 0550

### The Local Authority Health Network

c/o The Health Policy Advisory Unit 14-18 West Bar Green Sheffield S1 2DA Tel 0742 729556 Fax: 0742 780738





## The Royal Environmental Health Institute of Scotland

Virginia House 62 Virginia Street Glasgow G1 1TX Tel 041-552 1533 Fax 041-553 2525

# The Health Promotion Agency for Northern Ireland

The Beeches
12 Hampton Manor Drive
Belfast BT7 3EN
Tel 0232 644811 Fax 0232 491855

#### The Public Health Alliance

Snow Hill House 10-15 Livery Street Birmingham B3 2PE Tel 021-235 3698 Fax 021-236 1595

### Health Education Board for Scotland

Woodburn House Canaan Lane Edinburgh EH10 4SG Tel 031-447 8044 Fax 031-452 8140

#### **BRE Advisory Service Hotline**

Specific enquiries on ventilation measures in smoking areas should be directed to the Building Research Establishment through the BRE Advisory Service Hotline. Tel 0923 664707. The following publications provide further information on the health effects of passive smoking:

Fourth Report of the Independent Scientific Committee on Smoking and Health - the Froggatt Report, published by HMSO, 1988.

Passive Smoking: A Health Hazard, published by the Cancer Research Campaign and the Imperial Cancer Research Fund, 1991. (Available from Passive Smoking, PO Box 4RP, London W1A 4RP.)



#### **ECONOMIC EFFECTS**

In areas where smoking occurs, cleaning, redecorating, refurbishment and replacement of furnishing and fittings are required more frequently than in non-smoking areas. Obviously, this costs money. Also, proprietors of shops, restaurants, etc., may lose income if potential non-smoking customers, who are the majority, are discouraged from using or patronising their premises because of tobacco smoke.

#### SOCIAL EFFECTS

The smell from tobacco smoke causes annoyance and discomfort to many non-smokers and indeed to smokers themselves. It pervades hair, clothes and furnishings. The non-smoking majority, about 70% of the adult population, would largely prefer

not to breathe air polluted by tobacco smoke when visiting public places. Public opinion polls have consistently shown a demand for more smoke-free areas.

#### OTHER CONSIDERATIONS

In addition to the discomfort and health risks caused by tobacco smoke, smoking is also a major fire risk in commercial premises. Some legislation does exist to prevent smoking in particular circumstances. It provides, for instance, for the banning of smoking on most types of public transport, during the handling or preparation of food and in petrol station forecourts - all in the interests of health, hygiene and safety.

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