|  |  |  |
| --- | --- | --- |
| **STANDARD 1: Governance and commitment**The healthcare organisation has clear and strong leadership to systematically implement a tobacco-free policy | **SELF AUDIT***0 = No / not implemented**1 = Less than half implemented 2 = More than half implemented 3 = Yes / Fully implemented* |  |
| **IMPLEMENTATION CRITERIA** | **REFLECTION****Summary of current situation***(Please describe the current situation for each implementation criteria. This will provide a context for your planned actions for the next 12 months)* | **0** | **1** | **2** | **3** | **PRIORITIES****Summarise the actions flowing from the audit process for each criteria***(These will inform a more detailed planning process)* |
| **1.1** The healthcare organisation has clear policy documents towards the implementation of the Global Standards. | **1.1.1** Policy documents of the healthcare organisation show commitment to implement all the Global Standards. |  | ☐ | ☐ | ☐ | ☐ |  |
| **1.2** The healthcare organisation prohibits the acceptance of any sponsorship or funding from the tobacco industry, as well as the sale of their products and associated devices/ e-cigarettes. | **1.2.1** The healthcareorganisation prohibits the acceptance of tobacco industry sponsorship and funding. |  | ☐ | ☐ | ☐ | ☐ |  |
| **1.2.2** The healthcareorganisation prohibits the sale of tobacco products and associated devices/e- cigarettes. |  | ☐ | ☐ | ☐ | ☐ |  |
| **1.3** The healthcare organisation identifies clear accountability for all levels and aspects of policy implementation. | **1.3.1** A senior manager hasresponsibility for the implementation of the tobacco-free policy. |  | ☐ | ☐ | ☐ | ☐ |  |
| **1.3.2** Accountability is assigned at all levels and for all aspects of policy implementation. |  | ☐ | ☐ | ☐ | ☐ |  |
| **1.4** The healthcare organisation’s staff employment documents (including subcontracts and documents with other | **1.4.1** Staff employmentdocuments require staff commitment to the healthcare organisation’s tobacco-free policy. |  | ☐ | ☐ | ☐ | ☐ |  |

|  |  |  |
| --- | --- | --- |
| **STANDARD 1: Governance and commitment**The healthcare organisation has clear and strong leadership to systematically implement a tobacco-free policy | **SELF AUDIT***0 = No / not implemented**1 = Less than half implemented 2 = More than half implemented 3 = Yes / Fully implemented* |  |
| **IMPLEMENTATION CRITERIA** | **REFLECTION****Summary of current situation***(Please describe the current situation for each implementation criteria. This will provide a context for your planned actions for the next 12 months)* | **0** | **1** | **2** | **3** | **PRIORITIES****Summarise the actions flowing from the audit process for each criteria***(These will inform a more detailed planning process)* |
| agencies that work within the healthcare organisation) require commitment by all staff to the organisation’s tobacco-free policy. | **1.4.2** Subcontractor documents require staff adherence to the healthcare organisation’s tobacco- free policy. |  | ☐ | ☐ | ☐ | ☐ |  |
| **1.5** The healthcare organisation seeks relevant representation to develop and to implement a strategy and action plan based on the self-audit and policy monitoring and evaluation results. | **1.5.1** The strategy and action plan is developed and managed by an implementation team. |  | ☐ | ☐ | ☐ | ☐ |  |
| **1.5.2** The strategy and action plan is reviewed annually taking into account the results of the self-audit, monitoring and evaluation results. |  | ☐ | ☐ | ☐ | ☐ |  |
| **1.6** The healthcare organisation allocates the human and financial resources necessary for all aspects of policy implementation. | **1.6.1** Financial and humanresources are allocated according the strategy and action plan. |  | ☐ | ☐ | ☐ | ☐ |  |
| **Current audit:** |  |  |  |  |  |
| **Subtotal score for Standard 1:** *(Maximum possible score: 30)* |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **STANDARD 2: Communication**The healthcare organisation has a comprehensive communication strategy to support awareness and implementation of the tobacco-free policy and tobacco cessation services. | **SELF AUDIT***0 = No / not implemented**1 = Less than half implemented 2 = More than half implemented 3 = Yes / Fully implemented* |  |
| **IMPLEMENTATION CRITERIA** | **REFLECTION****Summary of current situation***(Please describe the current situation for each implementation criteria. This will provide a context for your planned actions for the next 12 months)* | **0** | **1** | **2** | **3** | **PRIORITIES****Summarise the actions flowing from the audit process for each criteria***(These will inform a more detailed planning process)* |
| **2.1** Interactive and targeted media is used to communicate the organisation’s tobacco-free policy and availability of tobacco cessation services to all staff and subcontractors before and during employment. | **2.1.1** All staff andsubcontractors are informed about the healthcare organisation’s tobacco-free policy and tobacco cessation services. |  | ☐ | ☐ | ☐ | ☐ |  |
| **2.2** Interactive and targeted media is used to communicate the organisation’s tobacco-free policy and availability of tobacco cessation services to all service users prior to and/or on admission. | **2.2.1** All service users are informed about the organisation’s tobacco free policy and tobacco cessation services. |  | ☐ | ☐ | ☐ | ☐ |  |
| **2.3** Interactive and targeted media is used to communicate the organisation’s tobacco-free policy and availability of tobacco cessation services in the community including specific target groups. | **2.3.1** The community including specific target groups is informed about the healthcare organisation’s tobacco-free policy and tobacco cessation services. |  | ☐ | ☐ | ☐ | ☐ |  |
| **Current audit score:** |  |  |  |  |  |
| **Subtotal score for Standard 2:** *(Maximum possible score: 9)* |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **STANDARD 3: Education and training**The healthcare organisation ensures appropriate education and training for clinical and non-clinical staff. | **SELF AUDIT***0 = No / not implemented**1 = Less than half implemented 2 = More than half implemented 3 = Yes / Fully implemented* |  |
| **IMPLEMENTATION CRITERIA** | **REFLECTION****Summary of current situation***(Please describe the current situation for each implementation criteria. This will provide a context for your planned actions for the next 12 months)* | **0** | **1** | **2** | **3** | **PRIORITIES****Summarise the actions flowing from the audit process for each criteria***(These will inform a more detailed planning process)* |
| **3.1** Policy briefings and instruction are mandatory for all staff, including managers. | **3.1.1** All staff including managers participate in policy briefings and instructions. |  | ☐ | ☐ | ☐ | ☐ |  |
| **3.2** The healthcare organisation ensures that all staff know how to approach tobacco, associate devices/e-cigarette users, including visitors, to inform them of the tobacco-free policy and tobacco cessation services. | **3.2.1** All staff are instructed on how to approach tobacco and associate devices/e-cigarette users to inform them about the tobacco-policy and tobacco cessation services. |  | ☐ | ☐ | ☐ | ☐ |  |
| **3.3** All clinical staff are trained in brief advice and best care measures for tobacco addiction/dependence in line with researched best practice. | **3.3.1** All clinical staff are trained in brief advice to motivate tobacco and associated devices/e- cigarette users to quit. |  | ☐ | ☐ | ☐ | ☐ |  |
| **3.4** Key clinical staff are trained in motivational tobacco cessation techniques in line with researched best practice. | **3.4.1** Key clinical staff are trained in motivational tobacco cessation techniques in line with researched best practice. |  | ☐ | ☐ | ☐ | ☐ |  |
| **Current audit score:** |  |  |  |  |  |
| **Subtotal score for Standard 3:** *(Maximum possible score: 12)* |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **STANDARD 4: Identification, diagnosis and tobacco cessation support**The healthcare organisation identifies all tobacco users and provides appropriate care in line with international best practice and national standards | **SELF AUDIT***0 = No / not implemented**1 = Less than half implemented 2 = More than half implemented 3 = Yes / Fully implemented* |  |
| **IMPLEMENTATION CRITERIA** | **REFLECTION****Summary of current situation** *(Please describe the current situation for each implementation criteria. This will provide a context for your planned actions for the next 12 months)* | **0** | **1** | **2** | **3** | **PRIORITIES****Summarise the actions flowing from the audit process for each criteria***(These will inform a more detailed planning process)* |
| **4.1** The healthcare organisation has a systematic procedure in place to identify, diagnose and document the tobacco addiction/ dependence status of service users (including users of associated devices/e-cigarettes). | **4.1.1** All tobacco/associated devices/e-cigarette users are systematically identified and have their addiction/dependence status diagnosed and documented. |  | ☐ | ☐ | ☐ | ☐ |  |
| **4.2** The healthcare organisation has a systematic procedure in place to identify and document all service users including babies, children and pregnant women who are exposed to secondhand smoke/e- cigarette vapour. | **4.2.1** All service users exposed to second-hand smoke/e- cigarette vapour are identified and document. |  | ☐ | ☐ | ☐ | ☐ |  |
| **4.3** Information about the risk of tobacco consumption (including the use of associated devices/e- cigarettes) and tobacco cessation methods is widely available for all service users. | **4.3.1** Information about the risk of tobacco consumption (including the use of associated devices/e- cigarettes) and tobacco cessation methods is widely available. |  | ☐ | ☐ | ☐ | ☐ |  |
| **4.4** All identified tobacco and associated devices/e-cigarette users receive brief advice in line with best researched practice. | **4.4.1** All tobacco and associated devices/e-cigarette users receive brief advice in line with best researched practice. |  | ☐ | ☐ | ☐ | ☐ |  |
| **4.4.2** All interventions to motivate tobacco users to quit are documented. |  | ☐ | ☐ | ☐ | ☐ |  |
| **4.5** The service user’s care plan identifies and meets the needs of the tobacco and associated | **4.5.1** Tobacco and associated devices/e-cigarette users and those exposed to secondhand |  | ☐ | ☐ | ☐ | ☐ |  |

|  |  |  |
| --- | --- | --- |
| **STANDARD 4: Identification, diagnosis and tobacco cessation support**The healthcare organisation identifies all tobacco users and provides appropriate care in line with international best practice and national standards | **SELF AUDIT***0 = No / not implemented**1 = Less than half implemented 2 = More than half implemented 3 = Yes / Fully implemented* |  |
| **IMPLEMENTATION CRITERIA** | **REFLECTION****Summary of current situation** *(Please describe the current situation for each implementation criteria. This will provide a context for your planned actions for the next 12 months)* | **0** | **1** | **2** | **3** | **PRIORITIES****Summarise the actions flowing from the audit process for each criteria***(These will inform a more detailed planning process)* |
| devices/e-cigarette user and those identified as exposed to secondhand smoke/e-cigarette vapour. | smoke/e-cigarette vapour have their needs identified and documented in the care plan. |  |  |  |  |  |  |
| **4.6** The healthcare organisation has a tobacco cessation service or a referral system to a service that provides treatment for tobacco addiction/dependence in line with researched best practice. | **4.6.1** All tobacco and associated devices/e-cigarette users have access to a tobacco cessation service that provides treatment in line with researched best practice. |  | ☐ | ☐ | ☐ | ☐ |  |
| **4.7** The tobacco cessation service considers the therapeutic requirements of different service- user groups (i.e. pregnancy, pre- operative, mental illness, disability) in line with researched best practice. | **4.7.1** The tobacco cessation service addresses the needs of different service-user groups through specific treatment guidelines or protocols in line with researched best practice. |  | ☐ | ☐ | ☐ | ☐ |  |
| **4.8** Pharmacological support is available for the treatment of tobacco addiction/dependence, in line with researched best practice. | **4.8.1** Pharmacological support is available to tobacco users in line with researched best practice. |  | ☐ | ☐ | ☐ | ☐ |  |
| **4.9** The tobacco cessation service used by the organisation follows up cessation service users in line with researched best practice. | **4.9.1** The tobacco cessation service has a procedure to follow up cessation service users in line with researched best practice. |  | ☐ | ☐ | ☐ | ☐ |  |
| **Current audit score:** |  |  |  |  |  |
| **Subtotal score for Standard 4:** *(Maximum possible score: 30)* |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **STANDARD 5: Tobacco-free environment**The healthcare organisation has strategies in place to achieve a tobacco-free campus. | **SELF AUDIT***0 = No / not implemented**1 = Less than half implemented 2 = More than half implemented 3 = Yes / Fully implemented* |  |
| **IMPLEMENTATION CRITERIA** | **REFLECTION****Summary of current situation***(Please describe the current situation for each implementation criteria. This will provide a context for your planned actions for the next 12 months)* | **0** | **1** | **2** | **3** | **PRIORITIES****Summarise the actions flowing from the audit process for each criteria***(These will inform a more detailed planning process)* |
| **5.1** The healthcare organisation has completely tobacco-free buildings (including associated devices/e-cigarettes). | **5.1.1** All buildings within the organisation are completely tobacco-free (including associated devices/e-cigarettes). |  | ☐ | ☐ | ☐ | ☐ |  |
| **5.2** The healthcare organisation has completely tobacco-free grounds and transport systems (including associated devices/e- cigarettes). | **5.2.1** The grounds and transports systems of the organisation are completely tobacco-free (including associated devices/e-cigarettes). |  | ☐ | ☐ | ☐ | ☐ |  |
| **5.3** The healthcare organisation has clear and unambiguous signage that defines the products prohibited and identifies boundaries for buildings and grounds of the tobacco-free campus. | **5.3.1** Signage identifies prohibited products and the tobacco-free campus boundaries for buildings and grounds. |  | ☐ | ☐ | ☐ | ☐ |  |
| **5.4** The healthcare organisation prohibits the sale, distribution and advertisement of tobacco products and associated devices/ e–cigarettes, anywhere within the organisation. | **5.4.1** Tobacco and associated devices/e-cigarettes are not sold, distributed or advertised within the organisation. |  | ☐ | ☐ | ☐ | ☐ |  |
| **5.5** The healthcare organisation has a procedure in place to ensure that all service users, staff and visitors are never exposed to secondhand smoke/e-cigarette vapour within the boundaries of the tobacco-free campus. | **5.5.1** There is a procedure to record and prevent secondhand smoke/e- cigarette vapour exposure. |  | ☐ | ☐ | ☐ | ☐ |  |

|  |  |  |
| --- | --- | --- |
| **STANDARD 5: Tobacco-free environment**The healthcare organisation has strategies in place to achieve a tobacco-free campus. | **SELF AUDIT***0 = No / not implemented**1 = Less than half implemented 2 = More than half implemented 3 = Yes / Fully implemented* |  |
| **IMPLEMENTATION CRITERIA** | **REFLECTION****Summary of current situation***(Please describe the current situation for each implementation criteria. This will provide a context for your planned actions for the next 12 months)* | **0** | **1** | **2** | **3** | **PRIORITIES****Summarise the actions flowing from the audit process for each criteria***(These will inform a more detailed planning process)* |
| **5.6** Any exceptional circumstances of tobacco use by service users are managed by a procedure that is consistent with the denormalisation of tobacco. | **5.6.1** All exceptionalcircumstances are managed by a procedure that is consistent with the denormalisation of tobacco consumption. |  | ☐ | ☐ | ☐ | ☐ |  |
| **5.7** The healthcare organisation has a procedure in place to document and manage any breaches of policy including incidents of exposure of staff, service users or public to secondhand smoke/e-cigarette vapour. | **5.7.1** A procedure is in place to register all incidents and to manage all policy breaches**.** |  | ☐ | ☐ | ☐ | ☐ |  |
| **Current audit score:** |  |  |  |  |  |
| **Subtotal score for Standard 5:** *(Maximum possible score: 21)* |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **STANDARD 6: Healthy workplace**The healthcare organisation has human resource management policies and support systems that protect and promote the health of all who work in the organisation**.** | **SELF AUDIT***0 = No / not implemented**1 = Less than half implemented 2 = More than half implemented 3 = Yes / Fully implemented* |  |
| **IMPLEMENTATION CRITERIA** | **REFLECTION****Summary of current situation***(Please describe the current situation for each implementation criteria. This will provide a context for your planned actions for the next 12 months)* | **0** | **1** | **2** | **3** | **PRIORITIES****Summarise the actions flowing from the audit process for each criteria***(These will inform a more detailed planning process)* |
| **6.1** The healthcare organisation has a comprehensive workplace health promotion program. | **6.1.1** The healthcare organisation has a comprehensive workplace health promotion programme. |  | ☐ | ☐ | ☐ | ☐ |  |
| **6.2** The healthcare organisation has policies that emphasise the pro- active and exemplary role of staff in the implementation and support of the workplace tobacco free policy. | **6.2.1** Organisational policies describe the pro-active and exemplary roles of staff in the implementation and support of the workplace tobacco free policy. |  | ☐ | ☐ | ☐ | ☐ |  |
| **6.3** The healthcare organisation has a process in place to identify and record the health status of staff (including tobacco and associated devices/e-cigarette use); and offers appropriate help, support and treatment as necessary. | **6.3.1** There is a process in place to identify and motivate tobacco and associated devices/e-cigarette users to quit. |  | ☐ | ☐ | ☐ | ☐ |  |
| **6.4** The healthcare organisation has a tobacco cessation service or direct access to a cessation service for the purpose of helping their staff tobacco users to quit. | **6.4.1** Staff have access to a tobacco cessation service. |  | ☐ | ☐ | ☐ | ☐ |  |
| **6.5** The healthcare organisation has a clear procedure in place within existing local disciplinary measures to manage policy non-compliance by staff. | **6.5.1** Non-compliance by staff is managed within existing local disciplinary procedures. |  | ☐ | ☐ | ☐ | ☐ |  |
| **Current audit score:** |  |  |  |  |  |
| **Subtotal score for Standard 6:** *(Maximum possible score: 15)* |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **STANDARD 7: Community engagement**The healthcare organisation contributes to and promotes tobacco control/prevention in the local community according to the WHO FCTC and and/or national public health strategy | **SELF AUDIT***0 = No / not implemented**1 = Less than half implemented 2 = More than half implemented 3 = Yes / Fully implemented* |  |
| **IMPLEMENTATION CRITERIA** | **REFLECTION****Summary of current situation***(Please describe the current situation for each implementation criteria. This will provide a context for your planned actions for the next 12 months)* | **0** | **1** | **2** | **3** | **PRIORITIES****Summarise the actions flowing from the audit process for each criteria***(These will inform a more detailed planning process)* |
| **7.1** The healthcare organisation works with community partners and other organisations to promote and contribute to local, national and international tobacco-free activities. | **7.1.1** The healthcare organisation works with community partners and other organizations to promote and contribute to national and international tobacco-free activities. |  | ☐ | ☐ | ☐ | ☐ |  |
| **7.2** The healthcare organisation works with community partners to encourage and support the users of tobacco and associated devices/e-cigarettes to quit; it takes into account the needs of specific target groups (women, adolescents, migrants, disadvantaged and other cultural groups). | **7.2.1** The organisation works with community partners to encourage and support tobacco and associated devices/e- cigarette users to quit. |  | ☐ | ☐ | ☐ | ☐ |  |
| **7.2.2** The organisation works with community partners to address the needs of specific target groups (women, adolescents, migrants, disadvantaged and other cultural groups). |  | ☐ | ☐ | ☐ | ☐ |  |
| **7.3** The healthcare organisation shares best practice to support others in the development and implementation of tobacco-free policies. | **7.3.1** The healthcare organisation shares best practice in the development and implementation of tobacco-free policies. |  | ☐ | ☐ | ☐ | ☐ |  |
| **Current audit score:** |  |  |  |  |  |
| **Subtotal score for Standard 7:** *(Maximum possible score: 12)* |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **STANDARD 8: Monitoring and evaluation**The healthcare organisation monitors and evaluates the implementation of all the Global standards at regular intervals. | **SELF AUDIT***0 = No / not implemented**1 = Less than half implemented 2 = More than half implemented 3 = Yes / Fully implemented* |  |
| **IMPLEMENTATION CRITERIA** | **REFLECTION****Summary of current situation***(Please describe the current situation for each implementation criteria. This will provide a context for your planned actions for the next 12 months)* | **0** | **1** | **2** | **3** | **PRIORITIES****Summarise the actions flowing from the audit process for each criteria***(These will inform a more detailed planning process)* |
| **8.1** The healthcare organisation has internal and external review processes to monitor the implementation of all standards and takes into account feedback from staff and service users. | **8.1.1** An internal process is in place to review the implementation of the standards at least annually. |  | ☐ | ☐ | ☐ | ☐ |  |
| **8.1.2** The review process takes into account feedback from service users and staff. |  | ☐ | ☐ | ☐ | ☐ |  |
| **8.1.3** The healthcare organisation participates in external review activities. |  | ☐ | ☐ | ☐ | ☐ |  |
| **8.2.** The healthcare organisation has processes to collect key data, including the self-audit results, to inform the annual action plan and to ensure quality improvement. | **8.1.4** Data collection processes are in place, including the self- audit, to monitor implementation of the tobacco free policy. |  | ☐ | ☐ | ☐ | ☐ |  |
| **8.1.5** Data collected is used to improve implementation and the annual policy action plan. |  | ☐ | ☐ | ☐ | ☐ |  |
| **Current audit score:** |  |  |  |  |  |
| **Subtotal score for Standard 8:** *(Maximum possible score: 15)* |  |  |  |  |  |
| **GRAND TOTAL: / 144 *(Maximum possible score: 144)*** |  |  |  |  |  |