Prohibiting smoking outside hospital buildings

Consultation Paper

September 2019
Prohibiting smoking outside hospital buildings: Consultation Paper

MINISTERIAL FOREWORD

In Scotland we have achieved considerable success in our ambition to create a tobacco-free generation by 2034. Among the most notable success was the introduction of offences for smoking in enclosed public spaces in 2006. We have an international reputation for pioneering this sort of public health measure and we now propose to take another step forward.

This consultation paves the way for extending the 2006 ban on smoking inside buildings to ban it around hospital buildings as well.

Smoking around Scotland’s hospitals continues to present a nuisance and a potential health risk to patients, visitors and staff. The sight of people smoking around the buildings is often the first thing people see on any visit to a hospital, and this has been the subject of many complaints to health boards and to government. Our hospitals need to be seen as accessible and open places which promote good health and lifestyle choices. Every aspect of daily life there should reflect that.

Allowing people to smoke around hospital buildings sends out an all too clear picture of tacit support for what is a significant cause of preventable illness and death. Smoking remains the most significant cause of disease in Scotland – with up to 100,000 hospitalisations per year as a result and over 9,000 premature deaths caused by smoking. One in four of all deaths in Scotland are still attributable to tobacco.

NHS Scotland took a bold step in 2015 by adopting a smoke-free grounds policy across all its hospitals. Each health board has a smoke-free policy which asks people to respect patients, staff and visitors by not smoking anywhere on hospital grounds.

The smoke-free grounds policy has had some impact, but has not been sufficient to end the practice of smoking around hospitals. Following a consultation on the continuing problem, the Scottish Ministers introduced a Bill to the Scottish Parliament which included two new offences: allowing people to smoke around hospital buildings; and smoking around hospital buildings. The Health (Tobacco, Nicotine etc. and Care)(Scotland) Bill was passed in 2016 and provides for the new offences and gives Ministers powers to regulate in respect of some key details.

The Scottish Government has worked with health boards and others to develop practical proposals for an effective set of regulations that will persuade people to respect others and not smoke around hospital buildings. This consultation seeks views on these details to allow the regulations to be finalised and laid in the Scottish Parliament.

JOE FITZPATRICK
Minister for Public Health, Sport and Wellbeing
EXECUTIVE SUMMARY

Context

The Health (Tobacco, Nicotine etc. and Care) (Scotland) Act 2016 amended sections of the Smoking, Health and Social Care (Scotland) Act 2005 (“the 2005 Act”) to provide for offences to be introduced in respect of smoking around hospital buildings.

As a result, the 2005 Act now provides for the introduction of formal no-smoking areas outside hospital buildings and for offences of allowing smoking in these areas and of smoking in these areas. The Act gives the Scottish Ministers powers to make secondary legislation (“Regulations”) to finalise the details before these provisions can be brought into force.

The three matters which remain to be determined are:

a) the distance from hospital buildings which will form the perimeter of the no-smoking areas outside a hospital building and how the perimeter around the building is determined in so far as whether the perimeter ends the specified distance from a wall or from any part of the building structure or otherwise;

b) the manner of display, form and content of no-smoking notices; and

c) whether there are any exceptions required for specific hospitals or specific buildings, or specific areas of land which should not be considered hospital grounds or part of the no-smoking areas respectively under the definitions in the Act.

Additionally, a question not raised at the time of the Act about the use of Nicotine Vapour Products (NVPs) - including electronic cigarettes - around hospitals has arisen more recently. As evidence shows that the use of NVPs is less harmful than smoking and as the proportion of smokers who are also using NVPs is growing, there is now an opportunity to consider if the smoking policies of health boards should now allow vaping on hospital grounds to help eliminate the continued flouting of NHS policies aimed at preventing smoking anywhere on hospital grounds. Many boards already allow vaping but some do not. There is a need for consistency. This is an opportunity to offer clear guidance to health boards on whether the use of NVPs on hospital grounds should be allowed as an alternative for smokers visiting or working in hospitals.

This question will have no legal bearing, as the use of NVPs is not covered in the 2005 Act in respect of either hospital grounds or around hospital buildings. However, it would be useful to know if there was public support for a Scotland-wide approach to the use of NVPs as an alternative to smoking on hospital grounds.
This consultation asks for your views on seven specific proposals. It asks if you support our view that:

1. the distance from hospital buildings which will form the perimeter of the no-smoking area outside a hospital building should be 15 metres;

2. the perimeter should be measured from the outside wall of a building and include all land or area under any canopy or overhang even where those extend beyond 15 metres;

3. the wording and dimensions of no smoking notices should be as described at question three of this consultation;

4. no specific hospital or type of hospital should be exempted from the definition of “hospital” in the Act;

5. no smoking areas will only apply to buildings used wholly or partly as a hospital;

6. public footpaths, cycle paths and footways should be considered hospital grounds for the purposes of establishing no-smoking areas outside the doorways of hospital buildings, and that the size of the grounds would extend up to 15 metres from the centre of doorways;

7. NHS health boards should amend their smoking policies to allow the use of NVPs as an alternative to smoking on hospital grounds but not within the no-smoking area outside hospital buildings.

In addition, we ask you to consider any potentially positive or negative impacts these proposals may have on equalities for people in Scotland.

Consultation responses will be analysed and considered to help inform the final regulations and associated guidance.

This consultation is open from 9 October 2019 to 10 January 2020.

We invite your views to each of the questions and offer an opportunity to comment.
INTRODUCTION

Aim

The primary aim of introducing a formal no-smoking area around hospital buildings is to support the de-normalisation of smoking and help reduce the use of tobacco across the population. The NHS should be an exemplar of health promotion and support people in their efforts to stop smoking.

We also aim to prevent or reduce exposure to second-hand smoke outside and inside hospital buildings to improve and protect public health.

This consultation seeks views on specific details required to introduce no-smoking areas in accordance with existing law. These details will be set out in Regulations.

In addition, it seeks views on permitting the use of Nicotine Vapour Products on hospital grounds, but beyond the no-smoking area, to assist those who may find it otherwise difficult to resist smoking on the grounds and to promote a less harmful choice and subsequent quit attempt.

Who will be affected?

The reduction in exposure to second-hand tobacco smoke outside hospital buildings should have a positive impact on everyone visiting a hospital and particularly to young people and adult non-smokers. It should also assist those who are attempting to quit tobacco products by removing the visibility of smoking in a health-promoting environment.

Those who may find it difficult to resist smoking tobacco products on hospital grounds due to stress and other factors, we suggest, should be permitted to use Nicotine Vapour Products beyond the mandatory no-smoking area. Providing this alternative should help alleviate some of the compliance problems experienced with the voluntary ban and encourage current smokers to attempt to quit through the use of this less harmful alternative.

Why are we proposing these Regulations?

These Regulations will implement the primary legislative provisions contained in the Health (Tobacco, Nicotine etc. and Care) (Scotland) Act 20161 (“the 2016 Act”).

In passing the Act, the Scottish Parliament determined that offences should be introduced for smoking within the no-smoking area outside hospital buildings. These Regulations are needed to bring those offences into force as they define critical aspects of the offences – such as the size of the perimeter area, or fine tune aspects – such as hospital grounds or buildings.

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1 The Health (Tobacco, Nicotine etc. and Care) (Scotland) Act 2016
**Background**

The Scottish Government is committed to raising a tobacco-free generation by 2034\(^2\) and to reduce the prevalence of smoking to five per cent or less by that same year.

While smoking rates have significantly declined with fewer people taking up the habit and the proportion of ex-smokers outnumbering the number of smokers for the first time in 2013, there is more that needs done to achieve our 2034 target.

Smoking tobacco products continues to be one of the greatest threats to public health in Scotland. It is the cause of around one in five of all deaths and kills two in every three long-term smokers. Smoking is known to reduce the effectiveness of medications, including those prescribed for mental health conditions, remains the most significant cause of preventable cancer and contributes to much of Scotland’s cardio-vascular and pulmonary health problems. In addition to the health inequalities smoking creates, it is a significant financial burden that contributes to social and economic inequalities.

Despite NHS Scotland introducing its policy to prevent smoking on hospital grounds in 2015 many people still choose to ignore the rules and continue to smoke there. This is not acceptable and especially close to hospital buildings which increases the nuisance and health risk to other people.

The Scottish Government’s tobacco control action plan builds on what has already been achieved in reducing the burden of tobacco on society. One of the many actions we have committed to pursuing is the making of an offence to smoke within 15 metres of hospital buildings. This will support the current administrative ban on smoking on hospital grounds by extending the statutory ban on smoking inside hospitals to a set distance outside those buildings.

This consultation refers to specific measures already in legislation, as contained in the Health (Tobacco, Nicotine etc. and Care) (Scotland) Act 2016. The full public consultation\(^3\) for the 2016 Act, which took place in 2015, identified substantial support for appropriate regulation.

An ASH Scotland/YouGov survey, undertaken in 2015, indicated that 73% of a representative sample of the Scottish population would be in favour of a complete ban on smoking on hospital grounds. There was also strong public support for national legislation to apply and enforce such a ban in a consistent and proportionate manner across Scotland.

\(^2\) Raising Scotland’s Tobacco-free Generation, Tobacco Control Action Plan 2018
\(^3\) A Consultation on Electronic Cigarettes and Strengthening Tobacco Control which ran from 10 October 2014 to 2 January 2015
Current restrictions

In March 2015, the Green Curtain Campaign\(^4\) introduced an administrative ban asking all patients, visitors and staff to wait until they were off grounds before lighting up. This voluntary ban was supported by a national TV and radio campaign and was part of the drive to create a tobacco-free generation by 2034.

Developed by NHS Health Scotland, the campaign asked smokers to refrain from smoking on grounds as part of a smoke-free commitment which extended to all NHS premises, hospitals, health centres, community facilities, offices and other non-patient buildings. It was a request designed to change behaviour and was not backed by any penalty or other sanction for non-compliance other than staff requesting that the individual stop smoking or leave the grounds.

Several complaints have been made to the Scottish Government and health boards about the continued visibility of smoking and the potential harm from smoking around buildings. These complaints have come from staff, visitors, patients, pressure groups and other concerned individuals.

It has been an offence to smoke or permit others to smoke in certain wholly or substantially enclosed public spaces for well over a decade in Scotland. The indoor smoking ban was received and supported by the public. The aim of the Smoking, Health and Social Care (Scotland) Act 2005 (“the 2005 Act”), was to encourage behaviour change and it would now be difficult to even imagine someone smoking inside an enclosed public space such as a hospital waiting room.

Section 1 - No-smoking area

The primary aim of the hospital-related provisions in the 2016 Act is to support the de-normalisation of smoking on NHS hospital grounds in order to reduce the use of tobacco across the population.

As was made clear in the policy memorandum for the 2016 Act, the Scottish Government does not believe it would be practical to introduce a statutory ban on smoking covering the entire extent of grounds associated with NHS hospitals. Such a ban would be very hard to enforce as many hospital sites cover large areas of land. The Government also believes it would be a disproportionate response to the problem of smoking being visible and potentially harmful where it is most undesirable – around buildings and particularly near building entrances and windows.

The policy memorandum highlights that there is evidence from studies of Second Hand Smoke (“SHS”) in outdoor environments which suggest that smoke-drift from outside can lead to levels of SHS inside building entrances and windows which may be high enough to warrant concern for people inside a building. The highest risk from smoke-drift will depend on the environment, but it is reasonable to expect that a

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\(^4\) The Green Curtain Campaign, Scottish Government and NHS Scotland 2015
no-smoking perimeter of 10 metres could provide adequate protection while a perimeter of 15 metres would reduce risk significantly.

During the Bill process Scottish Ministers indicated that the perimeter of no-smoking areas would ideally be 10-15 metres from hospital buildings. This focuses on the busiest areas where the majority of patients, visitors and staff pass through and where the bulk of non-compliance with the current administrative ban takes place. Ministers also committed to consult with health boards on the distance of the perimeter to be applied across all NHS Hospital sites. As a result of that consultation with health boards, and as published in the Scottish Government’s Tobacco Control Action Plan 2018, a distance of 15 metres is proposed for the no-smoking area perimeter.

There will be two situations where the actual perimeter could be greater than or less than 15 metres. The no-smoking area can only cover hospital grounds. So at any point where hospital grounds do not extend to 15 metres the no-smoking area perimeter will match the distance to which the hospital grounds extend. Also, we want to make sure smoking is not allowed anywhere under canopies or overhangs. Some of these could extend out from the hospital building more than 15 metres. So the proposal is that the perimeter, where there are larger canopies or overhangs, will extend to the edge of these where they are larger than 15 metres. See question 2, below

<table>
<thead>
<tr>
<th>Question 1</th>
<th>Do you support the proposal that the distance from hospital buildings which will form the perimeter of the no-smoking areas outside a hospital building should be 15 metres?</th>
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<td></td>
<td>Please tick one</td>
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<td>Yes</td>
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<td>No</td>
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<tr>
<td></td>
<td>Don’t Know</td>
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<td>If you have any comments on the perimeter distance please record those here.</td>
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**Measuring the perimeter distance**

Hospital buildings are of various age, design and construction. Many have incorporated walkways, canopies and other covered structures designed to provide protection from the elements. These structures may extend beyond the 15 metre distance.

Some hospitals, such as the new Queen Elizabeth University Hospital in Glasgow, have reported incidents where people have gathered under canopies and other structures to smoke – creating both an obstruction and air-quality hazard. To prevent instances such as this, we propose that the no-smoking area should include
all the land and areas beneath such canopies or overhangs – even where they measure more than 15 metres from the side of the hospital building.

**Question 2**

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<tr>
<th>Please tick one</th>
<th>Yes</th>
<th>No</th>
<th>Don’t Know</th>
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<tr>
<td>If you have any comments on how and from where the perimeter distance should be measured please record those here.</td>
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**Section 2 - No-smoking notices**

It is proposed that the Regulations should prescribe two different types of notice warning people of the existence of the statutory no-smoking area. The Act stipulates that these notices must state that it is an offence to smoke in the no-smoking area outside a hospital building or knowingly to permit smoking there.

The first type of notice would be placed at the entrance to hospital grounds and measure one metre square. The second type of notice would be A3 size and be placed at the entrances to hospital buildings. However, we will also encourage hospitals to display this size of notice at different strategic locations on or near hospital buildings. The grounds notices would include the wording:

“*It is an offence to smoke or knowingly permit smoking in the no-smoking area outside a hospital building.*

“No smoking areas extend up to 15 metres around affected buildings and include all areas under canopies or other overhangs on those buildings.

“*Penalties and fines apply.*

“If you observe someone smoking in the no smoking area, a complaint may be made to a member of hospital staff.”
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<tr>
<th>Question 3</th>
<th>Do you support the proposal to set the wording and dimensions of no smoking notices as described above?</th>
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<td>Please tick one</td>
<td>Yes</td>
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<td>If you have any comments on the proposed wording and dimensions please record those here.</td>
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Section 3 – Exceptions

Hospitals

As amended, the 2005 Act states that for the purposes of Part 1 of that Act “hospital” means a health service hospital (as defined in section 108(1) of the National Health Service (Scotland) Act 19785). So for the proposed regulations a “hospital” means -

(a) any institution for the reception and treatment of persons suffering from illness,

(b) any maternity home, and

(c) any institution for the reception and treatment of persons during convalescence or persons requiring medical rehabilitation, and any institution for providing dental treatment maintained in connection with a dental school,

and includes clinics, dispensaries, and out-patient departments maintained in connection with any such home or institution.

The 2005 Act allows Scottish Ministers to provide that hospitals of a specific description are not hospitals for the purposes of Part 1 of the Act and the proposed offences. There would be no smoking offences around this type of hospital as it would be exempt.

We have considered the approach taken in implementing the smoking ban in public places under the prohibition of Smoking in Certain Premises (Scotland) Regulations 2006 (“the 2006 Regulations”) which banned inside hospitals, hospices and psychiatric hospitals. The Regulations distinguished between hospices and hospitals, and exempted adult hospices and designated rooms in psychiatric hospitals from the ban.

Those Regulations were made under section 4 of the 2005 Act which allows Ministers to list types of indoor public space where the ban should and should not apply. Those Regulations use the same definition of “hospital” as section 108 of the National Health Service (Scotland) Act 1978 and define psychiatric hospitals as types of hospital. Hospices are distinct from hospitals as they are used for palliative care and so do not fall within the 1978 Act definition of “hospital”. Section 4D of the 2005 Act gives Ministers discretion to provide that hospitals of a specified description are not to be regarded as hospitals for the purposes of Part 1 of the Act.

We are not proposing to exclude psychiatric hospitals from the definition of hospital. In discussion with NHS boards we have not identified any other types of hospital that should be exempted from the requirement to have a no-smoking area.

5 The National Health Service (Scotland) Act 1978
### Question 4

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<tr>
<th>Question 4</th>
<th>Do you support the proposal that no specific hospital or type of hospital should be exempted under the definition of “hospital” in the Act?</th>
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<td>Please tick one</td>
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If you have any comments on this exception please record those here.

### Hospital buildings

The 2005 Act defines a “hospital building” as meaning a building situated on hospital grounds. These buildings will be the buildings with no-smoking areas outside them. To distinguish between ancillary or non-medical buildings and buildings which are used to treat or care for patients, we propose that a building will not be considered a hospital building for the purposes of these Regulations if it is not wholly or partly used as a hospital. As with question 4, above, the definition of “hospital” comes from the 1978 Act. Examples of buildings which would be excluded from the definition include buildings used:

- a) as a hospice;
- b) to deliver support to the hospital such as laundry, catering, storage, heating or administration buildings;
- c) for teaching, learning or research; or
- d) to provide medical, pharmaceutical, ophthalmic and other services to non-resident persons.

The 2016 Act allows Scottish Ministers to provide that buildings of a specific description are not hospital buildings for the purposes of the proposed Regulations. There would not be a no-smoking area around these buildings as they would be exempt.

For further clarity we propose to regulate to say that buildings are not hospital buildings if they are not:

- a) used for the reception and treatment of persons suffering from illness;
- b) a maternity home;
- c) used for the reception and treatment of persons during convalescence or persons requiring medical rehabilitation;
- d) used for dental treatment and maintained in connection with a dental school;
- e) a clinic, dispensary or out-patient department maintained in connection with any building falling within paragraphs a) – d); or
- f) used to provide a corridor, walkway or other link between buildings used for any of the purposes mentioned in paragraphs a) – e).
From engagement with NHS Health Boards on whether any buildings of a specific description should be exempted, we do not believe there is any need to include any further specification in the regulations.

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<th>Question 5</th>
<th>Do you support the proposal that no-smoking areas will only apply to buildings used wholly or partly as a hospital?</th>
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<td>Please tick one</td>
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<td>If you have any comments on this exception please record those here.</td>
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**Hospital Grounds**

For there to be a no-smoking area outside a hospital building there must be hospital grounds. The extent of the no-smoking area will be limited, in many cases, by the extent of the hospital grounds.

The Act defines “hospital grounds” as meaning the land in the vicinity of a hospital and associated with that hospital. This will therefore include land used to access the hospital such as hospital footpaths, cycle paths and footways as well as hospital green spaces and hospital car parks.

The 2016 Act states that Scottish Ministers may provide that any specific types of land should or should not be considered to be “hospital grounds” and may otherwise elaborate on the meaning of “hospital grounds”. There is one type of non-hospital land we propose to include as being hospital grounds for the purposes of establishing no-smoking areas. The aim of this is to help avoid smokers congregating around entrances to hospital buildings on what is public land, not otherwise considered to be hospital grounds.

This is the land in the vicinity of doorways to hospital buildings which open out onto public footpaths, cycle paths and footways such as main streets – where there is no ground which would currently reasonably be considered to be hospital grounds. This would not include public roads.

For public areas outside hospital doorways we propose to limit the size of the “hospital grounds” to cover a no-smoking area up to 15 metres – measured from the centre of any hospital building doorway leading onto a public footpath, footway or cycle track. This would apply only where hospital building doorways do not obviously open onto what is already clearly regarded as hospital grounds.

For areas of public land which we propose would become hospital grounds only in respect of their proximity to hospital building doorways, there would be no requirement on health boards to place notices at the entrance to these grounds.
However, those with responsibility and management of the hospital buildings would have responsibility for placing notices at the doorways themselves.

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<tr>
<th>Question 6</th>
<th>Do you support the proposal that public footpaths, cycle paths and footways should be considered hospital grounds for the purposes of establishing no-smoking areas outside the doorways of hospital buildings, and that the size of the grounds would extend up to 15 metres from the centre of doorways.</th>
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<td>Please tick one</td>
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If you have any comments on this please record those here.

Section 4 - Nicotine Vapour Products on hospital grounds

In addition to questions relating to the specifics of the 2016 Act, the Scottish Government seeks views on proposals to ask NHS boards to amend their smoking policies to permit the use of Nicotine Vapour Products (NVPs), including electronic cigarettes, on hospital grounds but outwith the proposed no-smoking area.

The intention of the new offences is to eliminate smoking around buildings where continued smoking causes most inconvenience and harm. However, NHS Scotland already has a policy in place which asks people not to smoke anywhere on hospital grounds. The aim of the new offence is not only to move smoking away from the building but to remove smoking completely from hospital grounds. Allowing smokers to vape on hospital grounds could reduce the ‘need’ to smoke there for many people.

There is now a consensus statement on the use of NVPs that has been drawn up by a range of signatories including public health professionals – such as the Chief Medical Officer for Scotland, academics – the universities of Edinburgh and Stirling, health lobbying groups - such as ASH Scotland and Cancer Research UK, and many others. It states that, based on current evidence, vaping e-cigarettes is less harmful than smoking tobacco. Although “not risk free”, these devices pose “a much lower risk than tobacco” and are useful to public health as a potential route towards stopping smoking.

Given the potential of NVPs in harm reduction and as a means to help people quit tobacco products, to ban their use on hospital grounds would be contrary to the ethos of the consensus statement. In addition, permitting use of a less harmful device for those smokers who may struggle to cope without nicotine during potentially stressful visits to hospital would be in line with the NHS’s compassionate...
approach: that it appreciates smoking is, for some people, a difficult habit to break but advises people to seek support to quit.

Therefore, we propose that NHS boards should be asked to amend their smoking policies to permit the use of NVPs as an alternative to smoking on hospital grounds but only beyond the no-smoking area outside hospital buildings.

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<th>Question 7</th>
<th>Do you support the proposal that the use of NVPs should be allowed as an alternative to smoking on hospital grounds but not within the no-smoking area outside hospital buildings?</th>
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If you have any comments on the proposal please record these here.

Section 5 – Equalities

The basic perimeter size of 15 metres for a no-smoking area outside certain hospital buildings will potentially impact more on some people than others.

For that reason we seek your views on how the proposals may impact on people with respect to age, gender, sex, sexual orientation and identity, ethnicity, religion or belief, disability, pregnancy and maternity or socioeconomic disadvantage?

Please consider both potentially positive and negative impacts, and, if applicable, advise on any mitigating actions that could be taken.

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<th>Question 8</th>
<th>Do you consider there to be any positive or negative impacts on equality as a result of the proposals in this consultation.</th>
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<td>Please tick one</td>
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If you have comments on any potential impact on equalities please record these here together with evidence and advice on mitigating actions.
SUMMARY OF CONSULTATION QUESTIONS

Do you support the proposals that:

1. the distance from hospital buildings which will form the perimeter of the no-smoking area outside a hospital building should be 15 metres;

2. the perimeter should be measured from the outside wall of a building and include all land or area under any canopy or overhang even where those extend beyond 15 metres;

3. the wording and dimensions of no smoking notices should be as described at question three of this consultation;

4. no specific hospital or type of hospital should be exempted from the definition of “hospital” in the Act;

5. no smoking areas will only apply to buildings used wholly or partly as a hospital;

6. public footpaths, cycle paths and footways should be considered hospital grounds for the purposes of establishing no-smoking areas outside the doorways of hospital buildings, and that the size of the grounds would extend up to 15 metres from the centre of doorways;

7. the use of NVPs should be allowed as an alternative to smoking on hospital grounds but not within the no-smoking area outside hospital buildings?

In addition, we ask you to consider any potentially positive or negative impacts these proposals may have on equalities for people in Scotland.
Responding to this Consultation

We are inviting responses to this consultation by 10 January 2020.

Please respond to this consultation using the Scottish Government’s consultation hub, Citizen Space (http://consult.gov.scot). Access and respond to this consultation online at https://consult.gov.scot/population-health/smoking-outside-hospital-buildings. You can save and return to your responses while the consultation is still open. Please ensure that consultation responses are submitted before the closing date of 10 January 2020.

If you are unable to respond using our consultation hub, please complete the Respondent Information Form to:

The Tobacco Control Team
Scottish Government
3E
St Andrew’s House
Regent Road
Edinburgh
EH1 3DG

Handling your response

If you respond using the consultation hub, you will be directed to the About You page before submitting your response. Please indicate how you wish your response to be handled and, in particular, whether you are content for your response to be published. If you ask for your response not to be published, we will regard it as confidential, and we will treat it accordingly.

All respondents should be aware that the Scottish Government is subject to the provisions of the Freedom of Information (Scotland) Act 2002 and would therefore have to consider any request made to it under the Act for information relating to responses made to this consultation exercise.

If you are unable to respond via Citizen Space, please complete and return the Respondent Information Form included in this document.

To find out how we handle your personal data, please see our privacy policy: https://beta.gov.scot/privacy/

Next steps in the process

Where respondents have given permission for their response to be made public, and after we have checked that they contain no potentially defamatory material, responses will be made available to the public at http://consult.gov.scot. If you use the consultation hub to respond, you will receive a copy of your response via email.

Following the closing date, all responses will be analysed and considered along with any other available evidence to help us. Responses will be published where we have been given permission to do so. An analysis report will also be made available.
Comments and complaints
If you have any comments about how this consultation exercise has been conducted, please send them to the contact address above or at tobaccocontrolteam@gov.scot.

Scottish Government consultation process
Consultation is an essential part of the policymaking process. It gives us the opportunity to consider your opinion and expertise on a proposed area of work.

You can find all our consultations online: http://consult.gov.scot. Each consultation details the issues under consideration, as well as a way for you to give us your views, either online, by email or by post.

Responses will be analysed and used as part of the decision making process, along with a range of other available information and evidence. We will publish a report of this analysis for every consultation. Depending on the nature of the consultation exercise the responses received may:

- indicate the need for policy development or review
- inform the development of a particular policy
- help decisions to be made between alternative policy proposals
- be used to finalise legislation before it is implemented

While details of particular circumstances described in a response to a consultation exercise may usefully inform the policy process, consultation exercises cannot address individual concerns and comments, which should be directed to the relevant public body.
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RESPONDENT INFORMATION FORM

Please Note this form must be completed and returned with your response.

To find out how we handle your personal data, please see our privacy policy: https://beta.gov.scot/privacy/

Are you responding as an individual or an organisation?

☐ Individual
☐ Organisation

Full name or organisation's name

Phone number

Address

Postcode

Email

The Scottish Government would like your permission to publish your consultation response. Please indicate your publishing preference:

☐ Publish response with name
☐ Publish response only (without name)
☐ Do not publish response

Information for organisations:
The option 'Publish response only (without name)' is available for individual respondents only. If this option is selected, the organisation name will still be published.
If you choose the option 'Do not publish response', your organisation name may still be listed as having responded to the consultation in, for example, the analysis report.
We will share your response internally with other Scottish Government policy teams who may be addressing the issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for Scottish Government to contact you again in relation to this consultation exercise?

☐ Yes

☐ No