



# Negotiating smoke-free workplaces: visiting clients in their home

From 1 July 2007 virtually all enclosed public places and workplaces in England will become smokefree. This guidance sets out some steps that employers who send staff to work in private premises may wish to consider taking in order to minimise the exposure of employees to the harmful effects of secondhand smoke.

## How does the law apply to private premises?

In general, private premises are not covered by the smokefree law, except for parts of dwellings used solely as a place of work by more than one person. However, this excludes any work that is undertaken solely to:

- provide personal care for a person living in the dwelling
- assist with the domestic work of the household in the dwelling
- maintain the structure or fabric of the dwelling
- install, maintain or remove any service provided to the dwelling for the benefit of persons living in it

Any enclosed or substantially enclosed part of a premises that is shared with other premises will also be required to be smokefree if it is open to the public or used as a place of work. For example, this may include a communal stairwell or lift in a block of flats.

## What about workers visiting clients at home?

Workers visiting clients in their home are not directly covered by the provisions of the Health Act. However union representatives will wish to ensure that employees are protected when visiting clients in their homes. Obviously staff should not be able to smoke while with a client.

Safety representatives and stewards will not wish to restrict the right of individuals to take part in a legal activity in their own homes, but employees also have a right not to be exposed to secondhand tobacco smoke. This is best done by seeking agreement with the employer that they will introduce guidance on this issue.

In some cases it may also be appropriate to add smokefree conditions into any service agreements with clients. All those who are visited regularly should be notified of the guidance or conditions in advance.

Clearly where a client or patient is suffering from dementia or some other illnesses this may be difficult to enforce and some tact may be required.

## Steps employers could take to minimise staff exposure to secondhand smoke

If the employer agrees to introduce guidance to limit staff exposure to secondhand smoke from clients/members of the public, the following steps should be considered:

- Ask any service users or clients who are visited regularly not to smoke for a certain period prior to any pre-arranged visit and during a visit. The client should also be asked to ensure that no-one living in the house with them smokes.
- If people do smoke, ask that they limit their smoking to rooms where people will not be working and open windows in rooms where people are working to help clear secondhand smoke.
- Identify members of staff who have a pre-existing condition that is made worse by exposure to tobacco smoke, such as asthma, COPD and cardiovascular disease or who face additional risks e.g. due to pregnancy. Members of staff who have such conditions are at higher risk and particular care should be taken to prevent or minimise their exposure to tobacco smoke.
- Ensure that no member of staff is expected to make consecutive visits, or even a sequence of visits, to houses in which they are likely to be exposed to tobacco smoke.

## Further information

This guidance is taken from the TUC's guide for union representatives entitled 'Negotiating smoke-free workplaces' which can be downloaded at <http://www.tuc.org.uk/extras/smokingguide2007.pdf>

If you work in the health or care sector, you may also find the Royal College of Nursing's guide helpful, which can be downloaded at [http://www.rcn.org.uk/publications/pdf/protecting\\_community\\_staff\\_smoke.pdf](http://www.rcn.org.uk/publications/pdf/protecting_community_staff_smoke.pdf)

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<http://www.smokefreeengland.co.uk>