

ENSH Self-audit Questionnaire

Performance evaluation towards a tobacco-free Organisation

Standard 1: Commitment	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
1.1 The healthcare organisation documents specify commitment to a policy towards the implementation of the ENSH Standards.				
1.2 The healthcare organisation does not accept any sponsorship from the tobacco industry.				
1.3 A policy working group or committee is designated to coordinate the development, implementation and monitoring of the tobacco-free policy.				
1.4 A senior manager has responsibility for the actions of the policy working group or committee.				
1.5 Financial and human resources are allocated in the healthcare organisation's operational plan and/or contract to implement and monitor the tobacco-free policy.				
1.6 All staff understand their responsibility to take action in the implementation and management of the tobacco-free policy.				
Standard 2: Communication	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
2.1 All healthcare personnel (including teachers, students and transient staff) are informed of the organisations tobacco-free policy.				
2.2 All contract and outsourced employees working within or in direct contact with the healthcare organisation are informed of the tobacco-free policy.				
2.1 All patients/residents (in and out-patients) are informed of the healthcare organisation's tobacco-free policy.				
2.2 Public is informed of the healthcare organisation's tobacco-free policy.				
Standard 3: Education & Training	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
3.1 Policy briefing/instruction is provided for all personnel on how to approach tobacco users and inform them of the organisations tobacco-free policy.				
3.2 Managers and clinical personnel are provided with mandatory policy briefings/ instruction.				
3.3 Brief intervention training is offered and available to all personnel.				
3.4 Key clinical personnel are trained in motivational and tobacco cessation techniques.				
Standard 4: Identification & Cessation Support	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
4.1 A systematic procedure is in place to identify				

and document the tobacco status of all patients/residents.				
4.2 The systematic procedure includes and records the passive smoking status of all patients/residents (according to national definition, including babies and children).				
4.3 A tobacco cessation service or direct access to cessation service is available for patients/residents (in-patients and out-patients).				
4.4 Interventions to motivate tobacco users to quit during the healthcare stay are documented in the patient/ resident care plans				
4.5 NRT/Pharmacological therapy is available within the organisation.				
4.6 Specific resources have been allocated for cessation support activities within the organisation.				
4.7 The cessation service provided by or accessed by the healthcare organisation, has in place a systematic one year follow-up procedure.				
4.8 Information on tobacco and tobacco cessation methods are widely available in the organisation				
Standard 5: Tobacco Control	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
5.1 The campus (grounds) and property owned by the healthcare organisation are completely tobacco-free.				
If 5.1 is fully implemented, a total score for this section is automatically awarded IF NOT questions 5.1 – 5.5 must be completed				
5.2 All facilities used by staff & visitors are tobacco free including all eating, work and common areas				
5.3 All facilities used by patients/residents are tobacco free including all treatment, eating and common areas.				
5.4 All transport, terrace and balconies operated and owned by the healthcare organisation are completely tobacco free.				
5.5 If tobacco uses takes place it is completely away and separate from designated tobacco free areas, windows and entrances.				
Standard 6: Environment	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
6.1 Signage indicating the tobacco free policy is visible to staff, patients/residents and visitors.				
6.2 Smoking areas are not allowed, but if some still remain ashtrays are only found in these areas.				
6.2.1 Staff are never exposed to passive smoking.				
6.3.2 Patients/residents are never exposed to tobacco use or passive smoking.				
6.3.3 Visitors are never exposed to passive smoking.				
6.4 Tobacco is not sold or available anywhere within the healthcare organisation.				
Standard 7: Healthy Workplace	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
7.1.1 All personnel are informed of the healthcare organisation's tobacco-free policy during the recruitment process.				

7.1.2 All personnel employment contracts require a commitment by personnel to the healthcare organisation's tobacco-free policy				
7.2 Personnel tobacco use prevalence is monitored annually.				
7.3 A tobacco cessation service or direct access to a cessation service is available for all personnel.				
7.4 Personnel policy non-compliance is managed within existing local disciplinary procedures				
Standard 8: Health Promotion	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
8.1 The healthcare organisation has participated in one or more local, national or international tobacco free activities within the last 12 months.				
Standard 9: Compliance Monitoring	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
9.1 The tobacco-free policy is internally monitored and reviewed annually.				
9.2 The quality of the tobacco free action plan has been reviewed and updated within a three year period.				
Standard 10: Policy Implementation	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
10.1 The healthcare organisation completes the ENSH self-audit questionnaire annually.				
Maximum Total:				
Scoring: No / Not implemented = 1 Less than half implemented =2 More than half implemented = 3 Yes / Fully implemented =4				