Evaluation of the South West Guidance for Delivering Smoke Free Homes: Executive Summary of Survey Findings

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Background

In early 2023, as part of the South West Directors of Public Health (DsPH) Sector-Led Improvement (SLI) programme, a region-wide Guidance for Delivering Smoke Free Homes was developed by a team of expert professionals and commissioners informed by an online bench marking survey completed by Health Visitors (HV). The purpose was to have a regional approach for HV to support families to establish and maintain smoke free homes, helping to reduce infant exposure to smoking-related harms. The guidance contained 6 recommendations for best practice in:

- *Improving the communication between Midwifery and HV teams*
- *Increasing the number of HV services carrying out Carbon Monoxide (CO) monitoring*
- *Enhanced smoke free training for HVs*
- *Improved awareness raising of the risks of second-hand smoke to children*
- *Increased referrals to local stop smoking services*
- *Improved data collection and monitoring.*

Introducing the above recommendations will also contribute towards:

- *Reducing the risk of relapse, where parent/caregiver has recently quit smoking*
- *Increasing the proportion of children living in parents/caregivers reported smoke free homes*

The South West DsPH requested to evaluate and understand how well the guidance has been implemented across the region. In August 2024 a refreshed expert group was re-established and as part of the evaluation a survey was developed. Launched in early December 2024, Health Visitor Leads/Managers, Health Visitors, Commissioners, and anyone involved in implementing or using the guidance across the region were asked to complete a survey as part of the evaluation. 71 participants responded to the survey.

Survey Participants	Count of No.
Health Visitor	35
Lead Health Visitor/Team Lead/Manager	18
EY/Family/Community Practitioner/Worker/Assistant	11
Public Health Specialist	3
Commissioner	2
Other	2
Grand Total	71

This executive summary provides a summary of finding and themes. A full report on the survey findings can be found here.

Awareness of the Guidance

52% of respondents had not heard of the Smoke Free Homes guidance

This is a key finding of the survey, particularly considering the recruitment bias this survey will encounter. It indicates that strategic awareness is high (e.g. among Commissioners and Public Health Specialists), but front-line awareness is low (e.g. Health Visitors). The remaining analysis represents the 34 respondents that were familiar with guidance.

Challenges to Embedding the Guidance

Among those aware of the guidance, 71% say it is only 'partially embedded', and 12% say it is not embedded at all.

Key challenges to embedding the guidance are:

- Capacity - insufficient staffing/resources *(received the most comments)*
- Carbon Monoxide (CO) Monitoring - lack of equipment or training
- Communication/Handover - poor continuity between services
- Funding - inadequate support for implementation

What Has Helped Embed the Guidance?

Funding (e.g. stop smoking grants)
Strong local networks and collaborations between teams and services
Clear communication in the guidance
Existing smoke-free teams and infrastructure in some areas

Usefulness of the Guidance

85% found it 'very' or 'somewhat helpful'
Key strengths are having an agreed pathway and guidance for the region and how it supports families.

Respondents provided their thoughts on areas for improvement, themes included:

- *Clarity of care pathway in a concise format (e.g. follow-up flowcharts)*
- *Communication across maternity and Health Visitor teams*
- *Training, especially on vaping and CO monitoring*
- *National coordination and resource availability*

Communication and Handover

70% said their HV team receives smoking status during pregnancy.
Only 55% said their HV team receives smoking status in the postnatal period.
Only 6% of Health Visitors receive fully completed Stop Smoking Passports.

Perceived communication quality between Maternity Services and HV teams is mixed with some improvements but also increased dissatisfaction.

Training and Champions

While Very Brief Advice (VBA) and Smoke Free Home training rates are high, the National Centre for Smoking Cessation and Training (NCSCT) online antenatal training is low (only 28.5% completed). Champion roles are rare (only 16% confirmed they had a champion in place).

CO Monitoring

Only 22% of respondents conduct CO monitoring
Most positive feedback from Wiltshire and Dorset (only areas with regular monitoring)

Referrals

84% can directly refer to their local Stop Smoking Service
However, electronic referrals, training on the systems, and feedback loops need improving (e.g. only 18% receive feedback post-referral)

Resources

Leaflet and resource distribution is inconsistent
Only 44.1% give out smoke free home leaflets
Over 55% do not meet best practice of having locally designed resources

Influencing Smoke Free Homes

Themes for influence: more training, CO monitoring, staff time, and simpler pathways. 30% said training is needed to better influence households

Respondents' views on how HVs could influence Smoke Free Homes

Theme/Topic	Potential Ideas
Broaden Awareness	Comms campaign and/or briefings to embed guidance more deeply across frontline workers
Improve CO Monitoring Access	Learn from the successful models in Dorset/Wiltshire and expand to other areas
Simplify and Clarify the Guidance	Introduce flowcharts, condensed summaries and FAQs to support the guidance. Also clarify expectations around vaping advice and non-smoker CO readings.
Boost Training and Champion Engagement	Push for increased uptake of NCSCT antenatal training and promote Health Visitor champions in every area, linking them to local Tobacco Control Networks
Enhance Communication and Handover	Review the Stop Smoking Passport process and work to improve data sharing across midwifery and Health Visitor teams
Strengthen Referral and Feedback Mechanisms	Ensure electronic referrals are used where possible and training is given. Encourage local stop smoking services to feedback to referrers
Improve Resource Distribution	Ensure consistent delivery of smoke free information leaflets to all households. Collaborate on a South West pack which can be 'made local'
Address Capacity Issues	Where possible, encourage partners to review and revise commissioning contracts to allow flexibility and resource reallocation, and to consider dedicated smokefree roles

Conclusion

The evaluation of the South West Guidance for Delivering Smoke Free Homes reveals mixed results in its implementation across the region. While strategic awareness among commissioners and public health specialists is high, front-line awareness among health visitors is notably low.

A key aim of the original guidance was to improve communication between Maternity Services and HV Teams. It is not clear if introduction of the guidance has seen improvement in this area, more needs to be done on supported joint working and improved handover. Other key challenges include insufficient HV capacity, lack of CO monitoring equipment and training, and inadequate funding.

Despite these challenges, the guidance has been somewhat helpful, with strong local networks, clear communication, and existing smoke-free teams aiding its partial embedding. However, improvements are needed in clarity, communication, training, national alignment, and resource availability. The guidance seems to have been particularly useful for strategic/commissioning purposes.

Suggestions for improvement focus on broadening awareness through campaigns, enhancing CO monitoring access, simplifying the guidance, boosting training and champion engagement, improving communication and handover processes, strengthening referral and feedback mechanisms, ensuring consistent resource distribution, and addressing capacity issues.

Next Steps

We will embed the guidance into the SW **Tobacco Control and Smoking Cessation Strategic Delivery Framework and Action Plan (2025-2030)** as well as advocate through the regional Tobacco Control Network, Health Visitors Network, and Smoking in Pregnancy forums. We need to broaden awareness of the guidance and promote engagement, specifically with Health Visitors, by providing information and advice about the benefits of the guidance and adoption of the Smoke free homes standards.

Local public health leaders will be encouraged to use the guidance to develop local quality improvement action that supports development of the maternity care pathway. Specifically, communication of handover processes, enhanced CO monitoring access, and engagement to training.

This summary compliments the full report, available here.