

ONLINE SUPPLEMENTAL MATERIAL

Smoke-free hospitals in Poland - a cross-sectional survey

Appendix 1. Original English-language version of the questionnaire assessing the state of smoke-free practices and e-cigarettes in hospitals

ENSH-Global Self-Audit Tool

Performance evaluation towards a Tobacco-free Organisation

Standard 1: Governance and Commitment	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
1.1 Policy documents of the healthcare organisation show commitment to implementation of all ENSH-Global Standards.				
1.2.1 The healthcare organisation prohibits the acceptance of tobacco industry sponsorship and funding.				
1.2.2 The healthcare organisation prohibits the sale of tobacco products and associated devices/e-cigarettes.				
1.3.1 A senior manager has responsibility for the implementation of the tobacco-free policy.				
1.3.2 Accountability is assigned at all levels and for all aspects of policy implementation.				
1.4.1 Staff employment documents require staff commitment to the healthcare organisation's tobacco-free policy.				
1.4.2 Subcontractor documents require staff adherence to the healthcare organisation's tobacco-free policy.				
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 Financial and human resources are allocated according the strategy and action plan.				
Standard 2: Communication	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
2.1 All staff and subcontractors are informed about the healthcare organisation's tobacco-free policy and tobacco cessation services.				
2.2 All service users are informed about the organisation's tobacco free policy and tobacco cessation services.				
2.3 The community including specific target groups is informed about the healthcare organisation's tobacco-free policy and tobacco cessation services.				
Standard 3: Education & Training	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
3.1 All staff including managers participate in policy briefings and instructions.				
3.2 All staff are instructed on how to approach tobacco and associated 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 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.				
Standard 4: Identification, Diagnosis and Tobacco Cessation Support	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
4.1 All tobacco/associated devices/e-cigarette users are systematically identified and have their addiction/dependence status diagnosed and documented.				
4.2 There is a procedure in place to identify and document service				

	users exposed to second-hand smoke/e-cigarette vapour.				
4.3	Information about the risk of tobacco consumption (including use of associated devices/e-cigarettes) and tobacco cessation methods are widely available.				
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 and e-cigarette users to quit are documented.				
4.5	Tobacco and associated device/e-cigarette users and those exposed to secondhand smoke/e-cigarette vapour have their needs identified and documented in the care plan.				
4.6	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 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 to tobacco users in line with researched best practice.				
4.9	The tobacco cessation service has a procedure to follow up cessation service-users in line with researched best practice.				
Standard 5: Tobacco-free environment		No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
5.1	The All buildings within the organisation are completely tobacco-free (including associated devices/e-cigarettes).				
5.2	The grounds and transports systems of the organisation are completely tobacco-free (including associated devices/e-cigarettes).				
5.3	Signage identifies prohibited products and the tobacco-free campus boundaries for buildings and grounds.				
5.4	Tobacco and associated devices/e-cigarettes are not sold, distributed or advertised within the organisation.				
5.5	There is a procedure to record and prevent secondhand smoke/e-cigarette vapour exposure.				
5.6	All exceptional circumstances are managed by a procedure that is consistent with the denormalisation of tobacco use.				
5.7	A procedure is in place to register all incidents and to manage all policy breaches.				
Standard 6: Healthy workplace		No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
6.1	The healthcare organisation has a comprehensive workplace health promotion programme.				
6.2	Organisational policies describe the pro-active and exemplary roles of staff in the implementation and support of the workplace tobacco free policy.				
6.3	There is a process in place to identify and motivate tobacco and associated devices/e-cigarette users to quit.				
6.4	Staff have access to a tobacco cessation service.				
6.5	Non-compliance by staff is managed within existing local disciplinary procedures.				
Standard 7: Community Engagement		No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
7.1	The healthcare organisation works with community partners and other organizations to promote and contribute to national and international tobacco-free activities.				
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 in the				

development and implementation of tobacco-free policies.				
Standard 8: Monitoring and Evaluation	No / Not implemented	Less than half implemented	More than half implemented	Yes / Fully implemented
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.				
8.2.1 Data collection processes are in place, including the self-audit, to monitor implementation of the tobacco free policy.				
8.2.2 Data collected is used to improve implementation and the annual policy action plan.				
Maximum Total: 144				

Scoring:

No/Not implemented = 0 // Less than half implemented=1 // More than half implemented = 2 // Yes /Fully implemented =3

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Supplementary Table SI. Detailed results for Standard 1: Governance and Commitment ($n = 100$)

1.1 Policy documents of the healthcare organisation show commitment to implementation of all ENSH-Global Standards.	Percent	Cumulative Percent
No/Not implemented	17.0	17.0
Less than half implemented	6.0	23.0
More than half implemented	16.0	39.0
Yes/Fully implemented	61.0	100.0
1.2.1 The healthcare organisation prohibits the acceptance of tobacco industry sponsorship and funding.	Percent	Cumulative Percent
No/Not implemented	5.0	5.0
Less than half implemented	1.0	6.0
More than half implemented	2.0	8.0
Yes/Fully implemented	92.0	100.0
1.2.2 The healthcare organisation prohibits the sale of tobacco products and associated devices/e-cigarettes.	Percent	Cumulative Percent
No/Not implemented	2.0	2.0
Less than half implemented	1.0	3.0
More than half implemented	1.0	4.0
Yes/Fully implemented	96.0	100.0
1.3.1 A senior manager has responsibility for the implementation of the tobacco-free policy.	Percent	Cumulative Percent
No/Not implemented	13.0	13.0
Less than half implemented	4.0	17.0
More than half implemented	18.0	35.0
Yes/Fully implemented	65.0	100.0
1.3.2 Accountability is assigned at all levels and for all aspects of policy implementation.	Percent	Cumulative Percent
No/Not implemented	8.0	8.0
Less than half implemented	6.0	14.0
More than half implemented	10.0	24.0

Yes/Fully implemented	76.0	100.0
1.4.1 Staff employment documents require staff commitment to the healthcare organisation's tobacco-free policy.	Percent	Cumulative Percent
No/Not implemented	38.0	38.0
Less than half implemented	10.0	48.0
More than half implemented	13.0	61.0
Yes/Fully implemented	39.0	100.0
1.4.2 Subcontractor documents require staff adherence to the healthcare organisation's tobacco-free policy.	Percent	Cumulative Percent
No/Not implemented	38.0	38.0
Less than half implemented	9.0	47.0
More than half implemented	16.0	63.0
Yes/Fully implemented	37.0	100.0
1.5.1 The strategy and action plan is developed and managed by an implementation team.	Percent	Cumulative Percent
No/Not implemented	40.0	40.0
Less than half implemented	6.0	46.0
More than half implemented	14.0	60.0
Yes/Fully implemented	40.0	100.0
1.5.2 The strategy and action plan is reviewed annually taking into account the results of the self-audit, monitoring and evaluation results.	Percent	Cumulative Percent
No/Not implemented	64.0	64.0
Less than half implemented	8.0	72.0
More than half implemented	7.0	79.0
Yes/Fully implemented	21.0	100.0
1.6 Financial and human resources are allocated according the strategy and action plan.	Percent	Cumulative Percent
No/Not implemented	57.0	57.0
Less than half implemented	21.0	78.0
More than half implemented	8.0	86.0
Yes/Fully implemented	14.0	100.0

Supplementary Table SII. Detailed results for Standard 2: Communication ($n = 100$)

2.1 All staff and subcontractors are informed about the Healthcare organisation's tobacco-free policy and tobacco cessation services..	Percent	Cumulative Percent
No/Not implemented	5.0	5.0
Less than half implemented	9.0	14.0
More than half implemented	11.0	25.0
Yes/Fully implemented	75.0	100.0
2.2 All service users are informed about the organisation's tobacco free policy and tobacco cessation services.	Percent	Cumulative Percent
No/Not implemented	2.0	2.0
Less than half implemented	13.0	15.0
More than half implemented	14.0	29.0
Yes/Fully implemented	71.0	100.0
2.3 The community including specific target groups is informed about the healthcare organisation's tobacco-free policy and tobacco cessation services.	Percent	Cumulative Percent
No/Not implemented	5.0	5.0
Less than half implemented	16.0	21.0
More than half implemented	13.0	34.0
Yes/Fully implemented	66.0	100.0

Supplementary Table SIII. Detailed results for Standard 3: Education & Training ($n = 100$)

3.1 All staff including managers participate in policy briefings and instructions.	Percent	Cumulative Percent
No/Not implemented	27.0	27.0
Less than half implemented	22.0	49.0
More than half implemented	8.0	57.0
Yes/Fully implemented	43.0	100.0
3.2 All staff are instructed on how to approach tobacco and associated devices/e-cigarette users to inform them about the tobacco-policy and tobacco cessation services.	Percent	Cumulative Percent
No/Not implemented	8.0	8.0
Less than half implemented	32.0	40.0
More than half implemented	12.0	52.0
Yes/Fully implemented	48.0	100.0
3.3 All clinical staff are trained in brief advice to motivate tobacco and associated devices/e-cigarette users to quit.	Percent	Cumulative Percent
No/Not implemented	15.0	15.0
Less than half implemented	29.0	44.0
More than half implemented	9.0	53.0
Yes/Fully implemented	47.0	100.0
3.4 Key clinical staff are trained in motivational tobacco cessation techniques in line with researched best practice.	Percent	Cumulative Percent
No/Not implemented	23.0	23.0
Less than half implemented	24.0	47.0
More than half implemented	7.0	54.0
Yes/Fully implemented	46.0	100.0

Supplementary Table SIV. Detailed results for Standard 4: Identification, Diagnosis and Tobacco Cessation Support ($n = 100$)

4.1 All tobacco/associated devices/e-cigarette users are systematically identified and have their addiction/dependence status diagnosed and documented.	Percent	Cumulative Percent
No/Not implemented	64.0	64.0
Less than half implemented	11.0	75.0
More than half implemented	10.0	85.0
Yes/Fully implemented	15.0	100.0
4.2 There is a procedure in place to identify and document service users exposed to second-hand smoke/e-cigarette vapour.	Percent	Cumulative Percent
No/Not implemented	64.0	64.0
Less than half implemented	11.0	75.0
More than half implemented	12.0	87.0
Yes/Fully implemented	13.0	100.0
4.3 Information about the risk of tobacco consumption (including use of associated devices/e-cigarettes) and tobacco cessation methods are widely available.	Percent	Cumulative Percent
No/Not implemented	13.0	13.0
Less than half implemented	12.0	25.0
More than half implemented	25.0	50.0
Yes/Fully implemented	50.0	100.0
4.4.1 All tobacco and associated devices/e-cigarette users receive brief advice in line with best researched practice.	Percent	Cumulative Percent
No/Not implemented	30.0	30.0
Less than half implemented	24.0	54.0
More than half implemented	13.0	67.0
Yes/Fully implemented	33.0	100.0
4.4.2 All interventions to motivate tobacco and e-cigarette users to quit are documented.	Percent	Cumulative Percent
No/Not implemented	58.0	58.0
Less than half implemented	9.0	67.0

More than half implemented	8.0	75.0
Yes/Fully implemented	25.0	100.0
4.5 Tobacco and associated device/e-cigarette users and those exposed to secondhand smoke/e-cigarette vapour have their needs identified and documented in the care plan.	Percent	Cumulative Percent
No/Not implemented	54.0	54.0
Less than half implemented	10.0	64.0
More than half implemented	16.0	80.0
Yes/Fully implemented	20.0	100.0
4.6 All tobacco and associated devices/e-cigarette users have access to a tobacco cessation service that provides treatment in line with researched best practice.	Percent	Cumulative Percent
No/Not implemented	19.0	19.0
Less than half implemented	28.0	47.0
More than half implemented	20.0	67.0
Yes/Fully implemented	33.0	100.0
4.7 The tobacco cessation service addresses the needs of different service-user groups through specific treatment guidelines or protocols in line with researched best practice.	Percent	Cumulative Percent
No/Not implemented	17.0	17.0
Less than half implemented	36.0	53.0
More than half implemented	16.0	69.0
Yes/Fully implemented	31.0	100.0
4.8 Pharmacological support is available to tobacco users in line with researched best practice.	Percent	Cumulative Percent
No/Not implemented	36.0	36.0
Less than half implemented	22.0	58.0
More than half implemented	6.0	64.0
Yes/Fully implemented	36.0	100.0
4.9 The tobacco cessation service has a procedure to follow up cessation service-users in line with researched best practice.	Percent	Cumulative Percent
No/Not implemented	54.0	54.0
Less than half implemented	12.0	66.0
More than half implemented	9.0	75.0

Yes/Fully implemented	25.0	100.0
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Supplementary Table SV. Detailed results for Standard 5: Tobacco-free environment ($n = 100$)

5.1 The All buildings within the organisation are completely tobacco-free (including associated devices/e-cigarettes).	Percent	Cumulative Percent
More than half implemented	3.0	3.0
Yes/Fully implemented	97.0	100.0
5.2 The grounds and transports systems of the organisation are completely tobacco-free (including associated devices/e-cigarettes).	Percent	Cumulative Percent
More than half implemented	3.0	3.0
Yes/Fully implemented	97.0	100.0
5.3 Signage identifies prohibited products and the tobacco-free campus boundaries for buildings and grounds.	Percent	Cumulative Percent
More than half implemented	2.0	2.0
Yes/Fully implemented	98.0	100.0
5.4 Tobacco and associated devices/e-cigarettes are not sold, distributed or advertised within the organisation.	Percent	Cumulative Percent
More than half implemented	2.0	2.0
Yes/Fully implemented	98.0	100.0
5.5 There is a procedure to record and prevent secondhand smoke/e-cigarette vapour exposure.	Percent	Cumulative Percent
No/Not implemented	54.0	54.0
Less than half implemented	12.0	66.0
More than half implemented	12.0	78.0
Yes/Fully implemented	22.0	100.0
5.6 All exceptional circumstances are managed by a procedure that is consistent with the denormalisation of tobacco use.	Percent	Cumulative Percent
No/Not implemented	8.0	8.0
Less than half implemented	19.0	27.0
More than half implemented	20.0	47.0
Yes/Fully implemented	53.0	100.0
5.7 A procedure is in place to register all incidents and to manage all policy breaches.	Percent	Cumulative Percent

No/Not implemented	54.0	54.0
Less than half implemented	11.0	65.0
More than half implemented	10.0	75.0
Yes/Fully implemented	25.0	100.0

Supplementary Table SVI. Detailed results for Standard 6: Healthy workplace ($n = 100$)

6.1 The healthcare organisation has a comprehensive workplace health promotion programme.	Percent	Cumulative Percent
No/Not implemented	22.0	22.0
Less than half implemented	17.0	39.0
More than half implemented	9.0	48.0
Yes/Fully implemented	52.0	100.0
6.2 Organisational policies describe the pro-active and exemplary roles of staff in the implementation and support of the workplace tobacco free policy.	Percent	Cumulative Percent
No/Not implemented	22.0	22.0
Less than half implemented	19.0	41.0
More than half implemented	17.0	58.0
Yes/Fully implemented	42.0	100.0
6.3 There is a process in place to identify and motivate tobacco and associated devices/e-cigarette users to quit.	Percent	Cumulative Percent
No/Not implemented	56.0	56.0
Less than half implemented	9.0	65.0
More than half implemented	7.0	72.0
Yes/Fully implemented	28.0	100.0
6.4 Staff have access to a tobacco cessation service.	Percent	Cumulative Percent
No/Not implemented	16.0	16.0
Less than half implemented	30.0	46.0
More than half implemented	9.0	55.0
Yes/Fully implemented	45.0	100.0
6.5 Non-compliance by staff is managed within existing local disciplinary procedures.	Percent	Cumulative Percent
No/Not implemented	47.0	47.0
Less than half implemented	9.0	56.0
More than half implemented	7.0	63.0
Yes/Fully implemented	37.0	100.0

Supplementary Table SVII. Detailed results for Standard 7: Community Engagement ($n = 100$)

7.1 The healthcare organisation works with community partners and other organizations to promote and contribute to national and international tobacco-free activities.	Percent	Cumulative Percent
No/Not implemented	52.0	52.0
Less than half implemented	22.0	74.0
More than half implemented	12.0	86.0
Yes/Fully implemented	14.0	100.0
7.2.1 The organisation works with community partners to encourage and support tobacco and associated devices/e-cigarette users to quit.	Percent	Cumulative Percent
No/Not implemented	51.0	51.0
Less than half implemented	23.0	74.0
More than half implemented	12.0	86.0
Yes/Fully implemented	14.0	100.0
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).	Percent	Cumulative Percent
No/Not implemented	49.0	49.0
Less than half implemented	24.0	73.0
More than half implemented	12.0	85.0
Yes/Fully implemented	15.0	100.0
7.3 The healthcare organisation shares best practice in the development and implementation of tobacco-free policies.	Percent	Cumulative Percent
No/Not implemented	55.0	55.0
Less than half implemented	12.0	67.0
More than half implemented	12.0	79.0
Yes/Fully implemented	21.0	100.0

Supplementary Table SVIII. Detailed results for Standard 8: Monitoring and Evaluation ($n = 100$)

8.1.1 An internal process is in place to review the implementation of the standards at least annually.	Percent	Cumulative Percent
No/Not implemented	70.0	70.0
Less than half implemented	8.0	78.0
More than half implemented	8.0	86.0
Yes/Fully implemented	14.0	100.0
8.1.2 The review process takes into account feedback from service users and staff.	Percent	Cumulative Percent
No/Not implemented	70.0	70.0
Less than half implemented	9.0	79.0
More than half implemented	6.0	85.0
Yes/Fully implemented	15.0	100.0
8.1.3 The healthcare organisation participates in external review activities.	Percent	Cumulative Percent
No/Not implemented	45.0	45.0
Less than half implemented	4.0	49.0
More than half implemented	9.0	58.0
Yes/Fully implemented	42.0	100.0
8.2.1 Data collection processes are in place, including the self-audit, to monitor implementation of the tobacco free policy.	Percent	Cumulative Percent
No/Not implemented	72.0	72.0
Less than half implemented	9.0	81.0
More than half implemented	4.0	85.0
Yes/Fully implemented	15.0	100.0
8.2.2 Data collected is used to improve implementation and the annual policy action plan.	Percent	Cumulative Percent
No/Not implemented	73.0	73.0
Less than half implemented	7.0	80.0
More than half implemented	7.0	87.0
Yes/Fully implemented	13.0	100.0