Winter Pressure and Smoking Communications Toolkit 2025

1/ About

Smoking worsens winter pressures on the NHS. Tobacco smoking not only causes cancer, heart disease, stroke, COPD and dementia but during the winter when demand on the NHS is at its highest, smokers suffer more severely from viruses such as flu and more likely to suffer flare ups or be admitted to hospital from COPD.

Partners across the NHS and public health are proactively involved in front line work and communications to minimise harm and risk from cold weather and seasonal respiratory illness.

This toolkit is aimed at helping partners to raise the topic of smoking and support the work of the Tobacco Dependency Treatment Services within Trusts:

- **Front line health professionals:**
  - to highlight how smoking causes and worsens a wide range of illness with worse outcomes in winter, and how treating tobacco dependency can help minimise harm
  - how to signpost to in-house and community-based support for tobacco dependency
- **NHS and LA communications leads**
  - to integrate quitting smoking messages into winter communications around **staying well – jump to section 5 to access the comms resource**

All social graphics and resources can be downloaded from the Fresh resources hub.

2/ Tobacco Dependency Treatment Services

All NHS staff encounter smokers in their daily work, and many have first-hand experience of caring for people whose lives have been destroyed by addiction to smoking. An intervention from a health professional such as a doctor, nurse or healthcare assistant can be life changing.

It is 3 years since all 10 NHS Foundation Trusts launched their onsite Tobacco Dependency Treatment Teams. Since then:

- **95,845** people have been identified as smoking on admission or at booking for maternity patients
- **67,900** patients have been referred to in-house NHS tobacco dependency treatment services to help with quitting or temporary abstinence whilst in hospital.

All inpatients admitted, or pregnant smokers engaged with maternity services, are asked about smoking and offered treatment for tobacco dependence as part of routine care. There are different pathways in hospitals for acute inpatient settings, mental health trusts and maternity. Some Trusts have also expanded their offer to include other key wards and staff support. You can find out more here **Tobacco Dependency | North East and North Cumbria NHS**.

For day patients, visitors, all staff, and those who would like support following discharge, community-based Stop Smoking Services are available across the region. To find stop smoking support in the North East visit **https://www.freshquit.co.uk/ways-to-quit/local-support/**

3/ Key actions

Front line health professionals:

ASK: All NHS staff to ask and record smoking status at every contact

ADVISE: Advise patients of their increased health risks caused by smoking, and let them know that there is support available to them as an inpatient (via the in-house NHS tobacco dependency service) or in the community (via local authority stop smoking service), and that they are four times more likely to quit with the right support

ACT: Refer patients for support from a specialist tobacco dependency / stop smoking service. If in the inpatient setting, provide nicotine replacement at the earliest possible timepoint, in line with your Trust protocol, to manage withdrawal from tobacco.

During patient admission
ASK the patient if they smoke and record smoking status ***If the patient does smoke then…***
ADVISE the patient that the best way to stop is with a combination of specialist support and medication, and both are available at the hospital
ACT an **opt-out electronic referral** to the local hospital tobacco dependence service and stop smoking medications prescribed / provided (ideally, **NRT** is provided within 2 hours of admission, as per trust protocol)

Find out about Delivery pathways for treating tobacco dependency in acute inpatient, mental health and maternity

Also:

- Be aware of the range of smoking related conditions as outlined in this document.
- Encourage staff who smoke to quit. Staff can access support via community stop smoking services, or via the Smokefree App.
- NICE guidance on treating tobacco dependency is available here.

Comms leads:

- Integrate messages around quitting smoking as part of winter comms – websites and printed communications, press releases, patient appointments, waiting room screens, and staff communications can all be tailored to provide information about your in-house support.
- Use internal communication channels to encourage staff to quit smoking
- Include detail about your in-house Tobacco Dependency Treatment Services in your patient-facing NHS communications - speak with your FT Smokefree lead or TDTS service manager. Further details can be found here

4/ How smoking adds to ill health and winter health pressures

Latest figures highlighted by Asthma and Lung UK show that there has been a 23% rise in the number of emergency admissions over three years for respiratory issues in England since 2022/23.

Although smoking does not **cause** flu or respiratory viruses, it weakens immunity, worsens respiratory health, makes smokers more likely to require treatment and significantly adds to winter pressures.

- Smoking harms the immune system and makes respiratory infections worse. Smokers are five times more likely to develop influenza than non-smokers and symptoms of both flu and Covid may also be worse.
- Smoking is linked to around 9 in 10 cases of COPD, with around 2.3m people in the UK thought to have the disease – with 600,000 undiagnosed. There is no cure – but stopping smoking prevents damage getting worse.
- Around 1.7 million people in the UK are living with COPD [2]. However, many people do not realise they have COPD, and another 600,000 people are estimated to be living with undiagnosed COPD [2]. Symptoms will often be worse during the winter.
- Cold weather increases the risk of heart and circulation problems – the highest incidence of CVD occurs during the winter months
- An estimated 1 in 4 patients in acute hospital beds in England are smokers[i] and there are around 408,100 hospital admissions a year due to smoking.[ii]

Find the full impact of smoking on health and winter illness in Appendix 1.

Watch Dr Ruth Sharrock, Clinical Lead for Tobacco Dependency within the NENC ICB talk about smoking and winter pressures. Videos for both staff and patients are available to download in the resources section below.

5/ Communications messages and resources

You can find below key messages, articles for staff and patients, and social media graphics/ videos featuring Dr Ruth Sharrock. Download social graphics, videos and waiting room screens from [the Fresh resources hub]

Key messages

- If you smoke, quitting is an important part of looking after yourself this winter
- Quitting smoking gives a boost to your immune system, making it easier to fight off colds, flu and other infections
- If you have a serious condition, smoking is likely to make it worse
- Smoking weakens your body's ability to fight off flu – it makes you more likely to catch flu and suffer worse symptoms
- Quitting smoking improves your chances of recovery from illness and makes you less likely to have to visit hospital as a patient
- If you are a hospital patient, it is important to stop smoking to improve recovery. Quitting smoking can help you recover faster from treatment and surgery and reduces your chances of being re-admitted
- Winter can be difficult for people living with COPD (chronic bronchitis or emphysema) or other respiratory conditions. Stopping smoking is the most important thing to help with breathing and staying out of hospital
- When you stop, you give your lungs the chance to repair and you will be able to breathe easier
- It is never too late to stop smoking. Even if you've tried before, the benefits begin at any age
- If you've been admitted to hospital, free support and quitting aids are available to help you stop smoking. Ask your clinical team about the Tobacco Dependency Treatment Service.

Staff-facing web/ intranet / newsletter copy

This winter quitting smoking is an important part of staying well and avoiding the need for hospital admission.

Our Trust is taking important steps to support patients to quit and reduce ward pressures, especially during the colder winter months.

Smoking adds to NHS winter pressures through causing or worsening a range of serious illnesses - including COPD and Cardiovascular disease, flu, pneumonia, and Covid.

Winter can be difficult for people living with COPD (chronic bronchitis or emphysema) or other respiratory conditions. Stopping smoking is the most important thing to help with breathing and staying out of hospital.

Quitting smoking improves outcomes for patients after surgery and also reduces the risks of a recurrence of cancer.

Support for Inpatients: All patients admitted are to be asked routinely if they smoke and if so, referred to in-house support from our Tobacco Dependency Treatment Service to manage their dependence while in hospital.

Support for outpatient and visitors: There is also support available to patients in the community looking for support to quit this winter. Support is available via the Smokefree App or via a Local Stop Smoking Service. Find local support at https://www.freshquit.co.uk/ways-to-quit/local-support/

For further information, speak with your Trust's Smokefree lead.

ADD LOCAL TDTS details as appropriate

Public / patient-facing copy for vaccine / winter wellbeing comms

If you smoke, quitting is also an important part of staying well and away from hospital this winter.

Quitting gives a boost to your immune system, making it easier to fight off colds, flu and other infections. If you have a serious condition such as COPD, smoking can make it worse – quitting can reduce your risk of a flare up and avoid the need for hospital admission.

Winter can be difficult for people living with COPD (chronic bronchitis or emphysema) or other respiratory conditions. Stopping smoking is the most important thing to help with breathing and staying out of hospital.

Stopping smoking also reduces your risk of a heart attack or stroke.

It is never too late to stop smoking. Even if you've tried before, the benefits begin at any age. We are here to help.

Find tips, advice and local support by visiting https://www.freshquit.co.uk

Public / patient-facing copy for websites/ newsletters

If you smoke, quitting is the best thing you can do to look after yourself this winter.

Smoking harms every part of the body. If you smoke, it can affect existing health conditions and worsen symptoms of flu, COPD and Covid, which can be worse in the winter.

Quitting smoking boosts your immune system. It makes it easier to fight off colds, flu and other infections which can be worse if you smoke.

If you are waiting for surgery or recovering from illness, stopping smoking can speed up your recovery and reduce your risk of having to be admitted back into hospital.

Our hospital is smokefree. If you are coming into hospital as a patient, you will be offered support to stop smoking tobacco for the time you are in hospital.

When you stop, you give your lungs the chance to repair and you will be able to breathe easier. The benefits of stopping smoking can be noticed immediately:

- The lungs and body start to repair from the moment you quit.
- After 20 minutes your heart rate returns to normal
- Within 48 hours your body clears out poisonous carbon monoxide
- Within weeks you'll be breathing easier and able to do more, and with quit aids your cravings should start to disappear
- After 3-9 months any coughs, wheezing or breathing problems will be improving as your lung function increases
- After 1 year your risk of a heart attack has halved

Many people try to quit smoking with willpower alone, but it's much easier with help like quitting aids, vaping and local stop smoking services.

Stop smoking support is available in local communities and at local pharmacies, or via your hospital's Tobacco Dependency Treatment Service.

Find tips, advice and local support by visiting https://www.freshquit.co.uk

Social media posts/ graphics/ and videos

These are designed to complement NENC ICS winter toolkit using the hashtag #HeretoHelp.

Use our social media graphics alongside these posts or the videos to download below.

If you smoke, quitting is an important part of looking after yourself this winter. Quitting reduces risks from flu, pneumonia and covid, as well as heart attack and stroke. If you have COPD, quitting is also important sooner rather than later. Quit smoking and breathe easier. Visit www.freshquit.co.uk for support to quit	
Smoking can make it harder to recover from winter illnesses such as flu, covid and infections If you've been admitted to hospital this winter, quitting is the best thing you can do for recovery. Quit smoking and breathe easier. Visit www.freshquit.co.uk for support to quit	

If you have COPD, quitting smoking is the best thing you can do for your lungs. It helps you breathe more easily, reduces coughing and breathing problems, and cuts the risk of flare-ups. Free NHS support is available. Never ignore feeling short of breath or a cough. Visit www.freshquit.co.uk for support to quit	

Social media / website videos

Download videos with Dr Ruth Sharrock, Respiratory Consultant and Clinical Lead for the North East and North Cumbria Smokefree NHS. These are for both staff and patients

Quit smoking this winter
Watch

Smoking and winter conditions
Watch

Smoking, winter, heart attacks and strokes
Watch

Appendix 1 - winter pressures are linked to worse outcomes from smoking and why addressing smoking among patients can help reduce disease and demand.

General health
Smoking harms nearly every organ of the body, causing lung cancer, respiratory disease and cardiovascular disease, as well as many cancers in other organs including lip, mouth, throat, bladder, kidney, stomach, liver and cervix.

Smoking significantly raises the risk of developing type 2 diabetes, eye disease and dementia. It leads to decreased bone mineral density and raises risks of osteoporosis, bone fractures, back pain and degenerative disc disease.[iii].

Smoking is the main cause of the three top reasons of hospital admission of people under 75 years of age (cancer, COPD, CVD).[iv]

Even people who have smoked for years can cut the risk of a heart attack relatively soon… the pulse rate returns to normal just 20 minutes after smoking, circulation improves within weeks and after 1 year the risk of having a heart attack is half that of a smoker.

COPD and asthma

Smoking is the main cause of Chronic Obstructive Pulmonary Disease (COPD) - the name for a group of lung conditions that cause breathing difficulties, including emphysema (damage to the air sacs in the lungs) and chronic bronchitis – long-term inflammation of the airways.

COPD is the second most common diagnosed lung disease in the UK after asthma. In the UK there are 1.7 million people with a diagnosis of COPD and an estimated 600,000 with the condition undiagnosed. Flare ups (also known as an exacerbation) for COPD are one of the most common reasons for people being admitted to hospital in the UK

Evidence suggests there could be as many as two million people in the UK with undiagnosed and untreated COPD – people who suffer the symptoms but without knowing they have it.[v]

In winter the cold air may cause a person's airways to become narrower which can make breathing even more difficult than normal for someone with COPD alongside the risk of catching infections and viruses such as flu which circulate at this time of year.

Each year around 30,000 people in the UK die from COPD[vi]. 80% of COPD deaths are caused by smoking. [vii]

Influenza and colds

Flu vaccinations are a vital part of efforts to protect patients and the NHS, but quitting smoking can also help people to protect themselves and reduce the likelihood of requiring emergency care.

- Smokers are five times more likely to develop influenza than non-smokers[viii]. Flu symptoms may also be worse among smokers.
- Quitting smoking gives people a boost to their immune system, making it easier to fight off colds and flu.[ix]
- In the winter months, the chance of catching the flu (seasonal influenza) increases and both flu and Covid-19 can be more serious for people with heart conditions.

Flu and Covid vaccinations and communications are a vital touchpoint to emphasise the importance of quitting smoking

Heart attack and stroke

At least 15,000 heart and circulatory disease deaths are caused by smoking every year. The risk of a heart attack declines quickly after stopping smoking.

Heart attacks increase almost immediately after a cold snap and have accounted for two-in-five winter excess deaths (the number of people who die during winter months compared to non-winter), and the same proportion of NHS excess winter admissions. [x]

Hospitals also see a rise in the admission of stroke patients five days after the cold weather begins and peak respiratory admissions go up 12 days after the temperature drops.

Dr Ruth Sharrock - smoking, winter and heart attack and stroke
https://www.youtube.com/watch?v=9DAEGE7Ills

Pneumonia
Evidence shows smokers are twice as likely to fall ill with pneumonia compared to non-smokers [xi] and have an increased chance of suffering pneumonia after surgery.

Pneumonia is more widespread in autumn and winter because respiratory viral infections such as flu which increase the risk of developing pneumonia are more common in the winter and spread easily from person to person.

Smokers account for approximately half of healthy adult patients with invasive pneumococcal disease (causes pneumonia, bacteraemia, and meningitis).[xii]

Covid-19
Smoking damages the lungs and immune system, increasing the incidence, duration and severity of respiratory infections caused by numerous types of viruses and bacteria. Smoking related conditions make smokers more vulnerable to Covid-19:

- A UK study (2021) suggests current smokers who get coronavirus were **twice as likely to attend hospital and report more symptoms than non-smokers**.[xiii] The analysis, by Imperial College London, King's College London, and ZOE (the health symptom tracking app) looked at data from 2.4 million people in the UK
- A study in BMJ Thorax (2021) suggested even light smokers (<9 a day) are **twice as likely to die from Covid-19**. Compared with people who had never smoked, current smokers were 80% more likely to be admitted to hospital and significantly more likely to die.[xiv]

Surgery and MRSA

Surgery: quitting smoking is a vital part of treatment to minimise risks from surgery and improve outcomes (Royal College of Anaesthetists). Following surgery, smokers also have:

- higher risk of lung and heart complications
- higher risk of infection and impaired wound healing
- more risk of longer hospital stays and higher drug doses
- more risk of being admitted to an intensive care unit and emergency re-admission

MRSA: Smoking can worsen MRSA - an antibiotic-resistant superbug, which can cause life-threatening skin, bloodstream and surgical site infections or pneumonia. Smoking can make MRSA more resistant to anti-biotics. [xv]

Pregnancy and childhood
Smoking during pregnancy increases the risks of complications in pregnancy, babies being born prematurely and being born with a low birth weight which can cause problems during and after labour.
https://smokefreeaction.org.uk/smokefree-nhs/smoking-in-pregnancy-challenge-group/

Children whose parents smoke are more likely to suffer from asthma and other serious illnesses that may need hospital treatment such as chest infections, pneumonia and bronchitis,

meningitis, ear infections and coughs and colds.

Mental health

Depression may be worse in the winter. Studies show that if you're a smoker, quitting can help improve anxiety and depression among people with and without diagnosed mental health disorders.

See: https://ash.org.uk/resources/view/smoking-and-mental-health

---

[i] https://publichealthmatters.blog.gov.uk/2019/03/21/health-matters-identifying-and-offering-brief-advice-to-tobacco-and-alcohol-users/
[ii] https://digital.nhs.uk/data-and-information/publications/statistical/statistics-on-smoking/statistics-on-smoking-england-2020
[iii] https://www.gov.uk/government/publications/smoking-and-tobacco-applying-all-our-health/smoking-and-tobacco-applying-all-our-health#harm-to-health-caused-by-smoking
[iv] http://www.londonsenate.nhs.uk/wp-content/uploads/2015/04/Helping-Smokers-Quit-Report-July-2016.pdf
[v] https://www.asthmaandlung.org.uk/sites/default/files/2023-03/delayed-diagnosis-unequal-care-executive-summary.pdf
[vi] https://www.asthmaandlung.org.uk/sites/default/files/2023-03/delayed-diagnosis-unequal-care-executive-summary.pdf
[vii] https://ash.org.uk/resources/view/smoking-and-respiratory-disease
[viii] https://thorax.bmj.com/content/76/7/714
[ix] https://www.nhs.uk/live-well/quit-smoking/
[x] https://www.england.nhs.uk/north/cold-weather-increases-risk-of-heart-attack-and-stroke/
[xi] https://ash.org.uk/resources/view/smoking-and-respiratory-disease
[xii] https://ash.org.uk/resources/view/smoking-and-respiratory-disease
[xiii] https://covid.joinzoe.com/post/covid-smoking-risk
[xiv] https://thorax.bmj.com/content/early/2021/09/12/thoraxjnl-2021-217080
[xv] https://www.bath.ac.uk/announcements/cigarette-smoke-makes-mrsa-superbug-bacterium-more-drug-resistant/