



Office for Health
Improvement
& Disparities

North West Schools Vaping Policy Framework

This framework is intended as local guidance and is not official government policy.

Contents

The Office for Health Improvement and Disparities	3
Introduction and purpose	4
Executive summary	5
Background	6
The role of schools	7
Screening, searching and confiscation	8
Developing a vaping policy	8
Disposal and safe storage	8
Following up on vaping behaviour	9
Working with local agencies	9
Support for pupils to stop using vapes	10
Reporting reactions	10
Identifying illicit vapes	11
Cannabis and other illegal substances	12
Incorporating vaping into a whole school approach	12
Resources and training for staff	13
Resources to support pupils, staff, families and carers to quit smoking	13
Acknowledgements	14

The Office for Health Improvement and Disparities

The Office for Health Improvement and Disparities (OHID) works across the Department of Health and Social Care (DHSC), the rest of government, the healthcare system, local government and industry to be creative about how we shift our focus towards preventing ill health, in particular in the places and communities where there are the most significant disparities.

As part of DHSC, OHID brings together expert advice, analysis and evidence with policy development and implementation to shape and drive health improvement and equalities priorities for government.

OHID's priorities are to:

- identify and address health disparities, focusing on those groups and areas where health inequalities have greatest effect.
- take action on the biggest preventable risk factors for ill health and premature death including tobacco, obesity and harmful use of alcohol and drugs.
- work with the NHS and local government to improve access to the services which detect and act on health risks and conditions, as early as possible.
- develop strong partnerships across government, communities, industry and employers, to act on the wider factors that contribute to people's health, such as work, housing and education.
- drive innovation in health improvement, harnessing the best of technology, analytics, and innovations in policy and delivery, to help deliver change where it is needed most.

OHID also supports the delivery of national and regional priorities for prevention and health inequalities and ensuring a joined-up approach to public health, building strong interfaces with different teams and areas of public health across the regional system.

This document was developed in conjunction with stakeholders across the North West of England region. It will be reviewed as new evidence and materials become available.

Introduction and purpose

This document is intended to provide guidance and a framework for schools and other educational settings, to support development of a Whole School Vaping Policy.

The advice is primarily for settings working with children and young people, including: headteachers, school staff and governing bodies in maintained schools, academies, free schools, independent schools, sixth form colleges, Pupil Referral Units (PRUs) and other forms of alternative education provision. It can be tailored for use in primary schools.

It may also be useful for: local authorities, parents/carers, school nurses, health professionals who have an input on substance use disorders and associated agencies such as trading standards teams and the police.

Schools may choose to use this information to adapt or include in their policies. School colleagues may want to consider using the following suggested headings/sections to include in a policy:

- Title of the Policy
- Name of School
- Lead member of staff responsible
- Lead Governor responsible
- Date policy ratified
- Review date
- Introduction, including the school values, vision, and ethos for a health promoting setting
- Aims of the policy
- Data: including national, regional, and local
- The Role of Schools & Staff
- The Role of Governors
- The Role of Parents/Carers
- The Role of Pupils
- Types of Incidents
- Search, Screening and Confiscation
- Disposal and Safe Storage
- Support for Vaping Behaviour
- Managing the use of cannabis and other illegal substances in vaping
- The PSHE Curriculum for smoking and vaping
- Resources and useful links

Executive Summary

This is a framework document designed to help guide and support schools and other organisations in developing their own vaping policies for children and young people.

Vaping is an important aid for adults to quit smoking but there has been a recent and marked rise in youth vaping. Vaping is less harmful than smoking, but not risk free as the long-term effects are unknown. Vapes should only be sold to people over the age of 18. In addition, there is a substantial market in illicit, unregulated vapes with an associated risk of a more extreme reaction. It is estimated that [a quarter of the vapes](#) sold to young people are not compliant with UK product regulations.

Schools' response to vaping falls broadly into two areas: incorporating vaping prevention to protect the health of young people, and managing behaviour related to vapes. This framework provides information and guidance in both these areas. Some key points are:

- Excessive use of vapes will present as nausea, sore throat, dizziness and headaches. In the event of an extreme adverse reaction, this should be reported to the Medicines and Healthcare products Regulatory Authority (MRHA) via the [Yellow Card Scheme](#). Vapes can contain illegal Tetrahydrocannabinol (THC) or be used to smoke cannabis.
- When a young person collapses or experiences an adverse effect seek help from the school nurse / accident and emergency and refer to your local young person's substance use service.
- Whilst vapes are not explicitly listed as prohibited items on Pg.7 of the [Searching, Screening and Confiscation document](#), schools can choose to add them to the list of banned products for which searches and confiscation can apply.
- Disposable vapes should never be disposed of in household waste and should instead be handed in to an approved collector of electrical goods waste. Larger vape stores may operate collection points, or you can contact your local authority waste service for further information.
- Work with local agencies such as Young People's Services, Trading Standards, Police and Safeguarding Teams will aid overall management of school vaping and any adverse vaping events.
- Resources are available for lessons and information relating to vaping. These include; the [PSHE Association year 9 lesson plan](#), "Talk to Frank" on [vapes](#), and [school materials](#) from Action on Smoking and Health / Smoke Free Sheffield, and [OHID School Zone resources](#)

Background

Vaping as an adult quit aid

In recent years, there has been an increase in the availability and awareness of vapes (also known as e-cigarettes). Vapes are now the most common adult stop smoking aid in the UK and the [latest evidence](#) on vapes shows that they are significantly less harmful than smoking tobacco. The availability of vapes now offers an alternative route to quitting for many adult smokers.

Smoking is the leading cause of premature death in England. In 2022 adult smokers over 18 comprised [12.7%](#) of the population. It is estimated that [two-thirds](#) will die early as a result. Despite an overall decline in prevalence, tobacco continues to have a long term, negative impact on smokers, families and communities. Supporting smokers to quit is therefore, the single biggest actionable activity to improve health and reduce inequalities.

Smoking in children and young people

Smoking rates have continued to fall among school age children. In 1996, 22% of 11 to 15 year olds in England reported smoking at least once a month. In 2021, the figure was 3%. A survey of over 13,000 14 to 17 years olds in the North West found [6% smoking](#). This is down from 22% in 2007. For most young people, vaping is not a gateway into smoking. As vape use has increased in children, there has been no associated increase in smoking. Rates for 11 to 15 year olds in England who smoke at least once a month has fallen from [9% in 2010 to 6% in 2016 and 3% in 2021](#)

Vaping in children and young people – prevalence

There is [clear advice \(1.6.3\)](#) from the National Institute for Health and Care Excellence that vapes should not be used by children, or those who do not currently smoke, as nicotine is an addictive substance and the long term risks are unclear. The [law](#) bans the sale of vapes for persons under 18 and bans the proxy purchasing of vapes for children by adults.

A large scale [2021 NHS Digital survey](#) found 9% of 11 to 15 year olds vaping at least once a month. However, figures from the 2023 North West Trading Standards survey indicate that 14% of 14 to 17 year olds are vaping more than once a week. The survey also indicates that 39% of children purchase vapes from local shops and 28% are given vapes by an under-18 friend.

Vaping in children and young people – risks

Excessive use of vapes can produce nausea, sore throat, dizziness and headaches. In addition, there is a substantial market in illicit, unregulated vapes with an associated risk of a more extreme reaction. It is estimated that [a quarter of the vapes](#) sold to young people are not compliant with UK product regulations.

The majority of vapes contain nicotine which is an addictive substance. Nicotine [may be more risky](#) for young people than for adults, as evidence suggests the brain in adolescence is more sensitive to its effects.

Sir Chris Whitty, England's Chief Medical Officer has advised that vaping is not risk free as the long-term effects are unknown. Additionally, unsafe, illegal vapes are available with recent reports showing they may contain dangerous levels of metals such as lead and nickel.

To summarise, vaping is a valuable aid for adults to quit smoking, but the long-term effects are unknown. Chris Whitty, summarised the risks in a [press article](#) as:

"If you smoke, vaping is much safer; if you don't smoke, don't vape"

The role of schools

Statutory duty

As part of the [statutory duty](#) to promote pupils' physical, mental health and emotional wellbeing, schools have a clear role to play in managing vapes as part of their pastoral responsibilities. Schools also have a [statutory duty](#) to deliver health education on drugs, alcohol, and tobacco.

The role schools have in managing vapes falls broadly into two categories:

1. Incorporating vaping prevention into the whole school's approach to health and wellbeing. This includes PSHE programmes and the wider curriculum, school policies, ethos and environment, and partnerships with parents and the local community.
2. Managing behaviour related to vapes and vaping.

Types of behaviour relating to vapes and vaping

Schools may need to tackle incidents associated with vaping, which might include:

- A child vaping in school or on school property.
- A child reported to be vaping in the local community.
- A child selling vapes to other pupils or peers.
- A child with vapes in their possession at school.
- Incidents related to vapes and coercion.

Searching, Screening and Confiscation

When developing school policy on vapes, it is recommended that schools prioritise the risk of youth uptake and treat vapes in the same way as other age restricted products, such as alcohol and tobacco, by prohibiting them onsite as a first step, and then confiscating and disposing of them.

Whilst vapes are not explicitly listed as prohibited items on Pg.7 of the [Searching, Screening and Confiscation document](#), schools can choose to add them to the list of banned products for which searches and confiscation can apply. Schools will need to ensure that vapes are also added to other relevant policy documents for consistency, such as School Behaviour Policies. When confiscating any vapes, the school should explain why and advise the young person of the harms associated with vaping.

Developing a Vaping Policy

Vaping should be addressed as early as possible by making vapes a prohibited item using the wider powers of [Searching, Screening and Confiscation](#), and setting out clear expectations for pupils, parents/carers, and staff in a school policy. This may be a separate policy of vaping and vaping products/or smoking or incorporated into the existing overall behaviour policy. It may also be included in any existing school substance use policy.

Vaping policy resources

DfE's [Searching, Screening and Confiscation](#) can be cross referenced with the [Behaviour in Schools Guidance](#). In addition, Action on Smoking and Health have produced [brief guidance](#), on developing school vaping policies which includes a recommendation to adopt a proportionate response to exclusion and punishment.

A vaping policy could be included in a review of the school's drug policy. The Department for Education has produced [guidance](#) on developing drugs policies in schools.

The document '[Use of E-cigarettes in Public Places and Workplaces](#)' also outlines considerations when developing the rationale for your policy.

Disposal and safe storage

Disposing of confiscated vapes and vaping liquids

Single use disposable vapes contain electrical components, including lithium-ion batteries, and are therefore considered Waste Electrical and Electronic Equipment (WEEE), in UK law. WEEE includes most products that have a plug or need a battery.

Such equipment should never be disposed of in household waste and should instead be handed in to an approved collector of WEEE waste. Details of your nearest recycling point can be found [here](#).

Larger vape stores may operate collection points, or you can contact your local authority waste service for further information. Some local authorities organise regular collections of vapes from schools; contact your public health or environmental services teams for details.

Safe Storage

The vast majority of vaping devices have circuitry to regulate battery power and protect vapers from battery malfunctions. On very rare occasions, a battery in a vaping device may fail by discharging all its stored energy at once. The risk is low; a [2022 OHID review](#) reported 15 fires related to vaping products across London from 2017-21 compared to 6428 from smoking, i.e. 0.2% of fire service responses in this category. However, as you will not know the prior handling of a confiscated device, the advice is to store them in a clearly marked container, away from flammable material (and for no longer than necessary) until you can dispose or recycle.

Following up on vaping behaviour

Schools should have a process in place to respond when vapes are identified through searching and screening, or vaping behaviour is observed, or reported in the setting or school community. This might involve:

- Exploring any safeguarding concerns, mental or physical health concerns, or other potential risk behaviours, such as substance use.
- Exploring how any confiscated vapes were obtained and reporting any illegal sales.
- Communication with parents or carers about the pupil's behaviour, the school's policy, and rationale for the screening, searching, confiscation and disposal of the vapes and vaping products.
- Making relevant referrals and/or providing advice and signposting to the pupil and their family.
- Responding to any safety incidents.

Working with other local agencies

When schools are developing policy and process around vaping, they may find it helpful to collaborate with local agencies for support.

Young People's Substance Misuse Services & School Health

Both Young People's Substance Misuse Services & School Health should be contacted. These services are able to deliver interventions to the young person which may include exploration of the harms of vaping and to support a young person if there is an underlying reason why a young person has chosen to vape in school.

Trading Standards

Trading Standards teams should be contacted if schools have concerns about underage sales of vapes and/or tobacco in their local community. These teams are also keen to be informed of any activity relating to illicit vape or tobacco products.

If you wish to report an incident to Trading Standards or require advice, please contact the Citizens Advice consumer helpline on **0808 223 1133** or by email using the form at Reporting to [Trading Standards – Citizens Advice](#).

Police

Illicit products may pull crime into local areas. Therefore, if appropriate, the local police may also need to be made aware. This is a consideration that schools should address this as part of their safeguarding policies and procedures, and behaviour policy. DfE's [Searching, Screening and Confiscation](#), states that being in possession of a prohibited item *"may mean that the pupil is involved, or at risk of being involved, in anti-social or criminal behaviour including gang involvement, and in some cases may be involved in child criminal exploitation"*.

Safeguarding

A search may play a vital role in identifying pupils who may benefit from early help or a referral to the local authority children's social care services. Local safeguarding teams should be informed of any concerns, as per schools' standard escalation processes. See [Keeping Children Safe in Education](#) and [Working Together to Safeguard Children](#).

Support for pupils to stop using vapes

Vaping is not recommended as a smoking quit aid for people under the age of 18. Nicotine Replacement Therapy (NRT) is available for over 12s. Support for those pupils who report a level of vaping addiction varies across local authorities.

Contact your local public health team or PSHE/Healthy Schools lead for more information on what's available in your area.

Reporting reactions

Why it is important to report

Reporting enables:

- Identification of youth vaping trends.
- Investigations into any dangerous substances and toxicity levels.
- Investigations into the legality of product.
- Assessment of risk and development of a locally co-ordinated plan where alerts need to be issued to prevent harm.

It is also important as part of the media management of any vaping adverse event on the school premises.

Yellow card scheme

Excessive use of vapes will present as nausea, sore throat, dizziness and headaches. This should be reported to the Medicines and Healthcare products Regulatory Authority (MRHA) via the [Yellow Card Scheme](#). The more data received through the Yellow Card process, the more action all of the regulators can take to try to improve the safety of the products.

Adverse reactions

When a young person collapses or experiences an adverse effect seek help from the school nurse / accident and emergency and refer to your local young person's substance use service.

Identifying Illicit Vapes

All vapes must comply with the requirements of the Tobacco and Related Products Regulations and be labelled in accordance with the regulations for hazardous substances. The key requirements are listed below.

- Nicotine-containing vapes must not:
 - have a nicotine strength of more than 20mg/ml or 2%
 - contain more than 2ml of nicotine-containing liquid
- The packaging (box) of a nicotine-containing vape must be labelled with:
 - Nicotine strength (e.g., 20mg/ml)
 - Volume of nicotine-containing liquid in the product (e.g., 2ml)
 - Stating the number of puffs is not sufficient on its own, but if any vape declares more than 1000 puffs, then it will contain more than 2ml of nicotine
 - Name, address and telephone number of a GB based responsible person (manufacturer or importer).
 - Health warning, which must be this exact wording:
"THIS PRODUCT CONTAINS NICOTINE WHICH IS A HIGHLY ADDICTIVE SUBSTANCE".
This warning must appear on the front and back of the box and cover at least 30% of the area of each of those surfaces.
 - Ingredients list
 - Hazard symbol and associated signal word, i.e.: either of the below:



- Tactile warning, to alert blind and partially sighted users to the above dangers. This is in the form of a raised triangle – run your hand over the box to find it.

Cannabis and other illegal substances

Cannabis

Vapes can be used to consume cannabis. A vapouriser is used to heat the cannabis, rather than burning it. Consumption of cannabis on school premises should be dealt with according to the school Substance Misuse Policy.

CBD

CBD oil is legal to sell in the UK, and this includes the sale of CBD vape juice. However, UK law dictates that any CBD oil sold must contain no nicotine. It must also contain no detectable THC.

THC

THC vape liquid is illegal and can produce the same effect as cannabis. It may contain synthetic cannabinoids. These products are more potent than cannabis and can produce adverse reactions and behaviour change, including excessive sweating, rapid heart rate, vomiting and fainting.

THC liquid may also include vitamin E acetate. This is used to dilute the liquid and can produce a toxic gas with associated lung injuries. It is not possible to tell by sight if this has been added to the liquid.

Other illegal substances

Some schools report concerns that vaping devices could be used and/or modified for delivering other substances. The management of these situations are covered in the [Screening, Searching and Confiscation Guidance](#) and should be incorporated into school drug and/or behavioural policies. Support should be sought from relevant partners, such as drug and alcohol services, police, and safeguarding.

Incorporating vaping into a whole school approach

In the longer term, schools might respond to vaping by making it a part of their whole school approach to health and well-being for all pupils and staff who work and learn at the setting. This could involve:

- Considering how the physical environment promotes vaping, for example are there any areas of the school site where vaping is regularly reported.
- Supporting all staff to feel confident in their knowledge of vaping, its risks (and benefits for adult smokers), and the law, through resources and training.

- Exploring how it can be linked to the school's ethos, culture, and values, for example around sustainability and the environment, or a positive sense of health and well-being.
- Teaching about vaping as part of the PSHE and RSE curriculum.
- Sharing information, resources & posting with parents and carers.
- Consider how the school signposts staff, parents and carers to seek quit support.

Some local authorities also commission smoking prevention training/programmes, which offer guidance and support for schools. Please contact your local public health team or PHSE/Healthy Schools lead to see if this is available in your area.

Resources and training for staff

Resources to incorporate vaping into lessons or PHSE material include:

- The [PSHE Association year 9 lesson plans](#). The lesson includes the environmental cost of vapes and analyses ways to challenge influences and misconceptions about vaping.
- Talk to Frank on [vapes](#). Talk to Frank provides clear, non-judgemental information on alcohol and drugs for young people. It has a 24 helpline on 0300 123 600.
- [ASH / Smoke Free Sheffield materials](#). This includes posters, leaflets, a short, animated film with associated notes and a classroom presentation.
- [OHID School Zone resources](#). These are three flexible bitesize sessions with film content aimed at Y7 & 8. The sessions cover the impact of vaping and the effects of nicotine on young people.

Resources to support pupils, staff, families and carers to quit smoking

Schools should be aware that many parents and carers may be smokers, with many making positive steps to a quit by using a vape. The resources below may be helpful for staff to support this.

The [NHS Better Health](#) site provides information on vaping devices and e-liquids, side effects, and vaping in pregnancy. Details of the [local stop smoking service](#) can also be found via the Better Health site.

The [NHS Live Well](#) site has information on vape safety and choosing the right vape for you.

Acknowledgments

Thanks are due to Karen Simmonds, who kindly allowed us to adapt her ADPH South East document [“Advice and Guidance: Managing Vapes in Schools”](#) .

The North West Schools Vaping Policy Framework was produced by the following:

- Alison Leigh, Behaviour Change Lead - Public Health, Stockport Council
- Fallon Slater-Forshaw, Public Health Senior Policy Officer, Stockport Council
- Julie Dunning, Health and Wellbeing Manager – Children and Young People’s Lead, Office for Health Improvement and Disparities – North West, Department of Health and Social Care
- Kelly O’Brien, Health Improvement Practitioner Specialist (Drugs and Alcohol), Manchester Healthy Schools Programme
- Naaira Zaman, Project Manager, Department of Public Health, Manchester City Council
- Paul Campbell, Health and Wellbeing Support Manager – Tobacco Control Lead, Office for Health Improvement and Disparities – North West, Department of Health and Social Care
- Tanya Cross, Health and Wellbeing Advisor, Stockport Council
- Victoria Hamlett, Public Health Programme Officer, Tameside Council

Other colleagues reviewed the document and/or provided expert input:

- Aimee Hodgkinson, Public Health Commissioning Manager, Trafford Council
- Becci Wadeson, Assistant Headteacher, Burnage Academy for Boys, Manchester
- Bushra Kamal, Safeguarding and Child Protection Lead (North), Star Academies
- Elpiniki Papadopoulou, Project Manager – Eclipse Young People’s Service, Safeguarding Lead, Change Grow Live Manchester
- Emma Starkey, Head of Inclusion and Teaching, Star Academies
- Holly Edwards-Meagher, Operational Manager, Early Break Young People and Family Service
- Janine Day, Director of Operations, Early Break Young People and Family Service
- Julia Carter, Senior Health Improvement Specialist, Public Health Team
- Lea Sloan, Wirral Schools Drugs Adviser, Barnardo’s
- Nicola Brearley, Assistant Headteacher and SENCO, Culcheth High School Community Campus
- Sarah Weigh, Early Help Team Manager, Youth Team Central and South Cluster, Warrington Borough Council
- Simon Eccles, Head Teacher, St Mary’s Catholic Academy, Blackpool