

#### **ITT SCHEDULE 1B**

#### PRIMARY CARE PUBLIC HEALTH SERVICES

#### SERVICE SPECIFICATION

## PROVISION OF NHS STOP SMOKING SERVICES

#### 1 INTRODUCTION

The Council is seeking a range of Providers to deliver NHS Stop Smoking Services for Service Users in the City who smoke tobacco.

The Council has appointed a representative organisation to work with providers to support healthy living outcomes across Sunderland; this is currently the Live Life Well Service within the Sunderland Integrated Wellness Model contract. The role of the representative organisation includes (but is not limited to) supporting the Stop Smoking Programme by:

- Overseeing quality assurance processes;
- Mentoring Providers;
- Providing training to support Programme delivery;
- Providing co-ordination of the Programme consumables:
- Supporting the development of pathways, procedures and joint working;
- Developing and distributing resource packs of materials to support the Programme;
- Using communications and marketing activity to raise awareness of and promote the Programme;
- Undertaking outreach activity to directly deliver NHS Stop Smoking Services to eligible persons in areas where levels of take up are low.

Providers will work in partnership with the Council, the Council's representative organisation and other stakeholders to deliver an evidenced-based and quality assured programme that:

 Delivers high quality, evidence based stop smoking interventions to our local population.

- Provides access to NHS stop smoking service interventions which comply with best practice and evidence.
- Provides recommended pharmacological products to reduce withdrawal cravings alongside a programme of behavioural support.
- Ensures individuals are signposted and/or referred to other services as appropriate.
- Promotes harm reduction, prevention, early intervention and self-care.
- Contribute to local public health and tobacco control strategies, which have a commitment to reduce prevalence of smoking.

The Council will separately commission an IT System (currently "Call It Quits") to support the delivery and quality assurance of the Stop Smoking Programme. Providers must work with the commissioned IT System Provider (currently "Call It Quits") and use the commissioned IT System (currently "Call It Quits") to deliver the Programme.

#### 1.1 National Context

The Council produces a Tobacco Joint Strategic Needs Assessment. Further information on national and local context can be found on <a href="http://www.sunderland.gov.uk/index.aspx?articleid=11915">http://www.sunderland.gov.uk/index.aspx?articleid=11915</a>.

Tobacco control is a complex issue which requires commitment and contributions from a range of partners across Sunderland. Over the past 5 years, smoking prevalence has been falling nationally, regionally and locally, though smoking remains the greatest contributor to premature death and disease, killing 1 in every 2 long term smokers. It is estimated that up to half of the difference in life expectancy at birth between the most and least affluent groups is associated with smoking.

A wide range of diseases and conditions are caused by smoking, including cancers, respiratory diseases, coronary heart and other circulatory diseases, stomach and duodenal ulcers, erectile dysfunction, infertility, osteoporosis, cataracts, age related macular degeneration and periodontitis.

The national prevalence of smoking in adults aged 18 years and over has fallen over the past decade from 24% to 16.9% in 2015.

#### 1.2 Local Context

Smoking remains the greatest contributor to premature death and disease across Sunderland. It is estimated that up to half the difference in life expectancy between the most and least affluent groups is associated with smoking.

The proportion of adults that smoke in Sunderland fell between 2010 and 2015 from 24.6% to 21.5%. In routine and manual groups smoking prevalence increased from 30.6% in 2011 to 34.1% in 2013 and has subsequently fallen to 29.4% in 2015. In Sunderland, 11.6% of 15 years olds and 18.7% of 16-17 year olds say that they smoke compared to 8.7% and 14.7% across England.

Rates of smoking are highest among young adults aged 18-24 years, males, people from socially and economically disadvantaged communities and people in routine and manual occupational groups. At ward level, the highest rates of smoking can be found in the Castle, Hendon and St. Anne's wards.

Smoking during pregnancy remains high in Sunderland. According to 2015/16 figures, 505 women in Sunderland were recorded as smoking at the time they gave birth; this equates to 18.0% of pregnant women compared to the England average of 10.6%. Smoking during pregnancy can cause serious pregnancy-related health problems. These include complications during labour and an increased risk of miscarriage, premature birth, still birth, low birth-weight and sudden unexpected death in infancy. Smoking during pregnancy also increases the risk of infant mortality by an estimated 40%.

One in twelve smokers in Sunderland access NHS Stop Smoking Services each year. In 2015/16, 47.7% of people setting a quit date had successfully quit at four weeks with 87% verified by use of a carbon monoxide (CO) monitoring, against a minimum standard of 85% of self-reported quits. NHS Stop Smoking Services have successfully targeted routine and manual occupational groups, among which the proportion of adults that smoke is highest. Young males and people from ethnic minorities are under-represented among Stop Smoking Service Users.

#### 2 PURPOSE AND OUTCOMES

# 2.1 Purpose

- 2.1.1 NHS Stop Smoking Services are intended to help people to live longer and healthier lives by delivering high quality, evidence based stop smoking interventions to our local population. As part of a broad programme of tobacco control, the Services aims to improve the health and wellbeing of smokers aged 12 years and over in Sunderland through a structured programme of support to prepare to stop smoking, successfully quit (at 4 weeks) and maintain the quit (to 12 weeks).
- 2.1.2 Supporting people to give up smoking will make a significant contribution to reducing health inequalities between Sunderland and England. Based on an assessment of smoking prevalence and outcomes, Sunderland has identified the following priority groups within the population for stop smoking support:
  - People from routine & manual groups;
  - Pregnant women;
  - People from black and ethnic minority groups;
  - People with serious mental health problems;
  - People living in deprived areas.
- 2.1.3 Sunderland is signed up to the strategic aim to reduce tobacco related harm and to reduce adult smoking prevalence to 5% by 2025.

#### 2.2 Vision

The vision for Sunderland's NHS Stop Smoking Services is of a systematic, evidence based programme focused on identification, early intervention, self-care and an integrated approach to lifestyle interventions that:

- Makes use of brief interventions, which involve opportunistic advice, discussion, negotiation or encouragement, to identify the eligible population and support referral.
- Utilises evidence-based behaviour change techniques including (but not limited to) motivational interviewing.
- Offers evidence based pharmacotherapies (nicotine replacement therapy (NRT), bupropion or varenicline) where clinically appropriate as aids to stop smoking and to help reduce nicotine cravings.
- Facilitates access to additional clinical support for Service Users requiring assessment for prescription only medication (bupropion or varenicline).
- Supports Service Users to self-care through the use of supporting information, website resources and approved applications (apps).
- Is delivered by suitably trained and competent staff.
- Is delivered in a range of health and community settings which are accessible to Service Users from all part of the City.
- Is person-centred, user-friendly and provides a positive Service User experience.

# 2.3 Programme Outcomes

2.3.1 The Providers will collectively contribute to the following indicators identified by the Public Health Outcomes Framework 2016-2019 from Public Health England <a href="http://www.phoutcomes.info/">http://www.phoutcomes.info/</a>

Domain	Indicator
Health	Low birth weight of term babies
Improvement	
	Smoking prevalence at time of delivery
	Smoking prevalence in young people aged 15 years
	Smoking prevalence adults aged 18 years and over
	Smoking prevalence in routine and manual workers
	Smoking related deaths

#### 2.4 Individual Outcomes

- 2.4.1 Maintain or increase the number of smokers accessing the Service, against a minimum standard of 5% of smokers accessing NHS Stop Smoking Services each year.
- 2.4.2 Maintain or increase the number of Service Users who set a quit date each year against a minimum standard of 20 quits per adviser per year.
- 2.4.3 Maintain or increase the proportion of Service Users who set a quit date and go on to successfully quit at 4 weeks, against a local target of 48%. NICE Guidance PH10 suggests that this proportion would be expected to fall between 35% and 70%. (Refer to www.nice.org.uk/guidance/ph10/)
- 2.4.4 Maintain or increase the proportion of Service Users who successfully quit at 4 weeks against a minimum local standard of 48% conversion rate. NICE Guidance PH10 suggests that this proportion would be expected to be over 45%. (Refer to <a href="https://www.nice.org.uk/guidance/ph10/">www.nice.org.uk/guidance/ph10/</a>)
- 2.4.5 Maintain or increase the proportion of Service Users who successfully maintain a quit 12 weeks against a minimum local standard of 30% conversion rate.
- 2.4.6 Maintain or increase the proportion of self-reported quits at 4 weeks and 12 weeks that are verified by use of a carbon monoxide (CO) monitoring, against a local minimum standard of 85%. National standards suggest that this proportion would be expected to be over 85%.

# 2.5 Branding, Marketing and Communications

- 2.5.1 Public Health England has produced a clear <u>brand identity for NHS Stop Smoking Services</u> (Smokefree) which distinguishes it from other commercially available offers. Sunderland NHS Stop Smoking Services will adopt this brand identify alongside resources produced by the Council and/ or Live Life Well Service which will bear the Live Life Well brand identity.
- 2.5.2 The Provider can use the Smokefree brand providing its use is in accordance with the branding guidelines. The Smokefree logo can be used with or without the NHS logo. Inclusion of the NHS logo is no longer permitted unless the Provider is part of the NHS. (Refer to <a href="https://www.ncsct.co.uk/usr/pub/LSSS\_service\_delivery\_guidance.pdf">www.ncsct.co.uk/usr/pub/LSSS\_service\_delivery\_guidance.pdf</a>)
- 2.5.3 All promotional materials for the Service must bear the phrase "working with the NHS to Provide Stop Smoking Services".

The Provider will:

2.5.4 Use the locally agreed supporting resources for the Programme as issued via the Council's representative organisation (currently the Live Life Well Service).

- 2.5.5 Ensure that all communication about the Service uses the agreed brand identities and is compliant with Stop Smoking identity guidelines.
- 2.5.6 Use the dedicated Public Health England Campaign Resource Centre (<a href="https://campaignresources.phe.gov.uk/resources/">https://campaignresources.phe.gov.uk/resources/</a>) to obtain further marketing resources and national campaign materials.
- 2.5.7 Support local campaigns as identified by the Council's representative organisation (currently the Live Life Well Service).

#### 3 SERVICE CRITERIA

#### 3.1 Inclusion Criteria

NHS Stop Smoking Service will be available to individuals aged 12 years and over who smoke tobacco, require help to quit (Clause 2.1.2) and are one or more of the following:

- Resident in Sunderland;
- b. Registered with a Sunderland GP;
- c. Working in Sunderland;
- d. Attending a school or college within Sunderland.

#### 3.2 Exclusion Criteria

- 3.2.1 There are no exclusions to the Service on the basis of gender, race, sexual orientation, physical and/or mental impairment, pregnancy or any other protected characteristic under the Equality Act in line with requirements stated in the General Specification (Clause 14.1), though the Provider will be able exclude Service Users where:
  - a. Acceptable behaviour is not upheld.
  - A professional risk assessment indicates that the Service User poses a serious risk to staff, other Service Users and/or members of the public.
- 3.2.2 Where a Service User is excluded from the Service, this must be discussed with the Service User and information must be provided about other available NHS Stop Smoking Services.
- 3.2.3 Nicotine replacement therapy products are not licensed for use in children under the age of 12, however if someone presents to the NHS Stop Smoking service under the age of 12 they must be referred to their own GP Practice or other provision as identified for support. The Provider will manage Safeguarding Children and Vulnerable Adults for the Service in line with requirements stated in the General Specification (Clause 11.5).

# 3.3 Safeguarding Adults and Children

- 3.3.1 The Provider must ensure that safeguarding adults and children is considered and managed at all times (General Service Specification, Clause 11.5).
- 3.3.2 Informed consent for the Service must be gained in accordance with National guidance. (Refer to <a href="www.cqc.org.uk/content/nigels-surgery-8-gillick-competency-and-fraser-guidelines">www.cqc.org.uk/content/nigels-surgery-8-gillick-competency-and-fraser-guidelines</a>). For young people aged 12 to 15 years informed consent should be assessed using Gillick Competencies.

#### 4 SERVICE DESCRIPTION

#### 4.1 Service Overview

- 4.1.1 The Sunderland programme for NHS Stop Smoking Services is divided into five broad areas of activity:
  - a. Identification and registration;
  - b. Assessment and quit date;
  - c. Supply of medication;
  - d. Structured support;
  - e. Completion and exit.
- 4.1.2 Assessment and structured support will be delivered using a suitable format including (but not limited to):
  - a. One-to-one (face to face) interventions;
  - b. Proactive telephone support;
  - c. Group behaviour therapy:
  - d. Couple and family support for a smoker and up to a maximum of six family members or friends.
- 4.1.3 For Service Users receiving one-to-one support, the programme is multisessional (Appendix 1), offering:
  - a. An initial assessment (pre-quit) appointment of at least 30 minutes duration;
  - b. A second appointment to set a quit date of at least 20 minutes duration, though these initial two appointments (Clause 4.1.3 a & b) may be combined into a single appointment of at least 40 minutes duration:
  - c. Four (post-quit date) appointments at weekly intervals of at least 15 minutes duration;
  - d. A further four (post quit date) appointments at fortnightly intervals of at least 15 minutes duration, for those Service Users who have successfully quit at four weeks.

- 4.1.4 For Service Users receiving group support, the programme is multi-sessional, offering:
  - a. An initial assessment (pre-quit) appointment of at least 30 minutes duration:
  - b. A second appointment to set a quit dates of at least 20 minutes duration, though these initial two appointments (Clause 4.1.4 a & b) may be combined into a single appointment of at least 40 minutes duration:
  - c. Four weekly group sessions of at least one hour duration;
  - d. A further four (post quit date) one to one appointments at fortnightly intervals of at least 15 minutes duration, for those Service Users who have successfully quit at four weeks to twelve weeks.
- 4.1.5 The process for conducting the NHS Stop Smoking Services in Sunderland is summarised in the process flow chart (Figure 1) (Clauses 4.2 4.6).
- 4.1.6 Smokers who have already stopped smoking when they first come to the attention of the Service, can only be counted as having been 'treated' and included in the national data return if they had quit 48 hours or less before attending the first session of a structured multi-session treatment plan. Where this is the case, their spontaneous quit date must be recorded as their actual quit date.
- 4.1.7 Service Users who begin their quit attempt in another healthcare setting (e.g., as an acute hospital inpatient, as a mental health service inpatient, from within maternity care) and have followed the relevant stop smoking pathways, can transfer into this Service on presentation of a standard letter (Appendix 2a and Appendix 2b) on official organisation letterhead, which includes as a minimum:
  - a. The Service User's name:
  - b. The date the Service User has been smokefree since (quit date);
  - A list of all pharmacotherapies (nicotine replacement therapy, bupropion or varenicline) being used as aids to stop smoking, including product names and strengths;
  - d. Any important information about healthcare conditions, treatment or medications that are relevant to the quit attempt;
  - e. Name and contact details for the Sending NTW Care Co-Ordinator;
  - f. Details of the receiving organisation and how to contact them;
  - g. General contact details for the Council's representative organisation (currently the Live Life Well Service).

Where a Service User is transferred into the Service in this way, the standard letter may be accepted in lieu of a positive Carbon Monoxide monitoring. Following this, the care pathway must be managed in accordance with Clauses 4.2 - 4.6.

Figure 1: Flow Chart Summary of the Sunderland NHS Stop Smoking Service

# **Process Flow Chart – Stop Smoking Service**

#### **Client Access**

- Receive referrals to the service via. Self Referral or 3rd party
- Provide access to appointment within 48 hours
- Seek identification and gain consent to store personal information
- Individuals to sign a declaration stating that they are not receiving NRT products from another provider
- Check whether details of new clients are already logged on the Call it Quits database
- Introduce individual to the support options available for stopping smoking and the structure of the interventions offered

#### Assessment

- Complete an assessment of service user needs including:
- . Current smoking status using CO monitor
- II. Complete
  Fagerstrom
  assessment,
  quitting aspiration
  and NRT required
- III. Key medical issues
- Log Key data items as expected on Call it Quits which includes Demographics, Occupation, Ethnicity, Date of last tobacco use. Agreed quit date, Type of intervention. Type of pharmacological support used, Use of other unlicensed nicotine containing products (e.g. ecigarettes) and Carbon Monoxide reading

#### Intervention

- Commence series of weekly and Bi weekly appointments
- Supply BI and recommend NRT vouchers
- Refer to the individuals GP where prescription only medications are required
- Review smoking status using CO monitor
- Log notes in relation to each session or activity
- Individuals who disengage should be followed up at 4 weeks following last contact
- Enable individuals to exit before 12 weeks, if successfully quit
- Enables individuals to re-refer to services in the event of relapse

# Completion

- Confirm that the individual remains smoke free using Carbon Monoxide verification
- Ensure that individuals are provided with information that enables them to rerefer to services in the event of relapse and are encouraged to do so at the earliest opportunity
- Log activity relating to the successful quit within the service user record
- Update records on Call it Quits

# 4.2 Referral and Registration

- 4.2.1 Receive referrals to the Service from one or more of the following routes, including (though not limited to):
  - a. Self-referral;
  - b. Referral arising from the Sunderland NHS Health Checks Programme;
  - c. Referral arising from clinical record review and Service User assessment in a General Medical Practice;
  - d. Opportunistic;
  - e. At the request of the Live Life Well Hub;
  - f. Referral from another providers of healthcare services (e.g., Sunderland City Hospitals NHS Foundation Trust; South Tyneside NHS Foundation Trust; Northumberland, Tyne and Wear NHS Foundation Trust);
  - g. Referral from other providers of NHS Stop Smoking Services within Sunderland.
- 4.2.2 Ensure that all Service Users are provided with an initial appointment for assessment within 48 hours of receipt of referral; this appointment must be at least 30 minutes in length.
- 4.2.3 Gain informed consent from the Service User for the collection, storage and sharing of information to support and monitor the quit attempt.
- 4.2.4 Verify the identity of all Service Users entering the Service using two separate forms of identity which may include (but are not limited to):
  - a. Passport (Photographic ID):
  - b. Driving license (Photographic ID);
  - c. A recent utility bill which is no more than 6 months old showing current address:
  - d. A recent bank statement which is no more than 6 months old showing current address.
- 4.2.5 Check whether details of the Service User are already logged on the supporting IT System (currently "Call it Quits"). Where there is no immediate IT access, the Provider must contact the Council's representative organisation (currently the Live Life Well Service) via the Live Life Well Hub on 0191 565 3482 to make relevant checks. Services must not be provided until checks have been completed.
- 4.2.6 Register the Service User with the Service once ID has been verified and checks have been performed and add details to the supporting IT System (currently "Call It Quits").

- 4.2.7 Ask each presenting Service User whether they are receiving pharmacotherapy to aid stop smoking from another provider and explain that Services may be withdrawn if it is found that the Service User is accessing multiple Providers for Stop Smoking Services and/or Stop Smoking aids at the same time.
- 4.2.8 Ask each presenting Service User whether they are using unlicensed nicotine containing products such as e-cigarettes.
- 4.2.9 Ensure that all Service Users sign a declaration stating that they are not receiving pharmacotherapy to aid stop smoking from another Provider and record this in the supporting IT System (currently "Call It Quits").
- 4.2.10 Introduce the Service User to the evidence based support options available for stopping smoking and the structure of the interventions offered and provide supporting information in the form of a Welcome Pack. These packs are produced and distributed to NHS Stop Smoking Service Providers by the Council's representative organisation (currently the Live Life Well Service). They should be available in a range of formats (e.g., large print, Braille, easy read, different languages) to ensure fair access to the Programme.
- 4.2.11 Liaise with the Council's representative organisation (currently the Live Life Well Service) to ensure that any suspected fraudulent activity (e.g. suspicious IDs, unanticipated increased in demand for the service) is reported.

#### 4.3 Assessment and Quit Date

All Service Users receiving NHS Stop Smoking Services will have an assessment undertaken as part of the initial appointment, following registration of the Service User. The process of setting a quit date should be undertaken in a separate second appointment, though these initial two appointments may be combined into a single appointment where this is appropriate for the Service User. Each Service User will be provided with a person centred plan of support to stop smoking.

#### <u>Assessment</u>

- 4.3.1 Ensure that a positive therapeutic relationship is established with Service User, building rapport and boosting motivation.
- 4.3.2 Ensure early establishment of the Service User's commitment and address any potential high risk situations.
- 4.3.3 Assess, confirm and record the Service User's current readiness and ability to quit smoking.
- 4.3.4 Assess and record the Service User's current smoking behaviour.

- 4.3.5 Assess and record the Service User's past history of quit attempts.
- 4.3.6 Explain to the Service User how tobacco dependence develops.
- 4.3.7 Assess and record the Service User's level of nicotine dependence using the <u>Fagerström Test for Cigarette Dependence</u> (FTCD). Score will identify the following:
  - a. 1 to 2 low dependency
  - b. 3 to 4 low to moderate dependency
  - c. 5 to 7 moderate dependency
  - d. 8 + high dependency
- 4.3.8 Explain and undertake carbon monoxide (CO) monitoring as a quick test to carry out, non-invasive and cost-effective means of validating the smoking status of the Service User. A CO reading ≤ 10 parts per million (ppm) would indicate a non-smoker, but note that a threshold of ≤ 4 ppm is recommended for pregnant smokers. For anyone with a reading of ≤ 10 ppm, repeat the test to ensure it is completed adequately (i.e. Service User to hold their breath for the required time and/or lips are placed around the tube properly). Service Users can still access the Service with a reading under ≤ 10 ppm.
- 4.3.9 Anyone with a CO reading of ≥ 70 ppm must be given advice about possible CO poisoning and advised to seek urgent medical assistance.
- 4.3.10 Explain to the Service User that Stop Smoking Services support smokers to stop smoking and not to cut down, and the importance of abrupt cessation and abstinence from smoking through 'not a puff' which means committing to not smoking one puff after their quit date.
- 4.3.11 Discuss withdrawal symptoms, cravings, and urges to smoke and how to deal with them with the Service User.
- 4.3.12 Discuss the use of pharmacotherapies (nicotine replacement therapy, bupropion or varenicline) as aids to stop smoking and to help reduce nicotine cravings. Explain that additional clinical support from the Service User's General Practitioner will be needed for Service Users who go on to use prescription only medication (bupropion or varenicline).
- 4.3.13 Assess and record any health related or medical issues including (though not limited to):
  - a. Physical health issues (such as pregnancy, breastfeeding status);
  - b. Drug and/or alcohol problems;
  - c. Mental health problems:
  - d. Medications being taken, including those affected by cigarette smoke (such as antidepressants, antipsychotics, benzodiazepines, opiates);
  - e. Contraindications to use of pharmacotherapies (nicotine replacement therapy, bupropion or varenicline) used as aids to stop smoking.

- 4.3.14 Discuss Service User preferences and agree a clinically appropriate pharmacotherapy including (but not limited to) confirming:
  - a. Choice of product;
  - b. Appropriate strength;
  - c. Dose:
  - d. Method of administration:
  - e. Correct use.
- 4.3.15 Record all assessment information on the Client Record Form and add it to the supporting IT system (currently "Call It Quits") in line with requirements stated in the General Specification (Clause 11.3 11.4).

#### Setting a Quit Date Process

- 4.3.16 Work with the Service User to agree and set a guit date.
- 4.3.17 Work with the Service User to identify any potential high risk situations in the week following the quit date.
- 4.3.18 Advise the Service User of strategies to cope with high risk situations and remain abstinent from smoking including (but not limited to):
  - a. Changing routines;
  - b. Committing to abrupt cessation and abstinence from smoking;
  - c. Discussing future plans and preparation;
  - d. How to access support:
  - e. Other relapse prevention techniques.
- 4.3.19 Arrange for the provision of the agreed pharmacotherapy in line with the requirements stated in the General Specification (Clause 4.4).
- 4.3.20 Record all information from the setting a quit date process on the Client Record Form and add it to the supporting IT System (currently "Call It Quits") in line with requirements stated in the General Specification (Clause 11.3 11.4).
- 4.3.21 Provide a summary of the person centred plan of support to stop smoking to the Service User.

# 4.4 Supply of Medication

- 4.4.1 Service User access to pharmacotherapies (nicotine replacement therapy, bupropion or varenicline) as aids to stop smoking must be provided in accordance with the Sunderland Guidance on the Recommendation and Supply of Stop Smoking Medicines for people providing NHS Stop Smoking Services. The guidance is provided in the Sunderland Stop Smoking Service New Adviser Training approved by the Commissioners and provided by the Council's representative organisation (currently the Live Life Well Service).
- 4.4.2 To ensure cost effectiveness of the Service and reduce diversion, recommendations for pharmacotherapy must be made from the agreed list of pharmacological products (Appendix 3).
- 4.4.3 It will be necessary to refer the Service User to their own GP for additional clinical support where prescription only medication (bupropion or varenicline) is recommended.
- 4.4.4 There are three ways to access pharmacotherapies as aids to stop smoking for use in the Sunderland NHS Stop Smoking Service as follows:
  - a. Voucher of recommendation for NRT only (Adviser) (Clauses 4.4.5-4.4.17);
  - b. Referral of recommendation for extra support and assessment of an individual's suitability for bupropion or varenicline (Clinical Intervention) (Clauses 4.4.18-4.4.22);
  - c. Prescription FP10s for NRT, bupropion and varenicline) (Prescriber) (Clauses 4.4.23-4.4.25).

## Voucher of Recommendation for NRT Only

- 4.4.5 Stop Smoking Advisers who do not have a prescribing qualification, but who have undertaken the approved training may recommend nicotine replacement therapy (NRT) using the Sunderland NRT Voucher Scheme. No photocopies of the Sunderland Nicotine Replacement Therapy Voucher will be accepted by Community Pharmacies. To order the approved Sunderland Nicotine Replacement Therapy Voucher, the Provider must contact the Council's representative organisation (currently the Live Life Well Service).
- 4.4.6 The approved Sunderland NRT Voucher Scheme aims to provide access to NRT for Services Users who are being supported through a quit attempt.
- 4.4.7 Electronic Cigarettes as a stop smoking aid must not be recommended via the Sunderland Voucher Scheme.

- 4.4.8 Under this scheme, the approved Sunderland NRT Voucher (Appendix 4) must be used by Stop Smoking Advisers to recommend and for Community Pharmacists to dispense nicotine replacement therapy as part of the Sunderland NHS Stop Smoking Service. The Provider must ensure that no other type of voucher is used, as payments will not be made for any other type of vouchers.
- 4.4.9 The approved Sunderland NRT Vouchers (Appendix 4) must be issued in line with the following:
  - a. The Sunderland Guidance on the Recommendation and Supply of Stop Smoking Medicines for people providing NHS Stop Smoking Services:
  - b. The observational checklist.

These will be issued during the Sunderland Stop Smoking Service Adviser Training.

- 4.4.10 A Service User is eligible to access the NRT Voucher Scheme if they are:
  - a. Registered with the Service;
  - b. Motivated to stop smoking;
  - c. Receiving advice and support from a trained Stop Smoking Adviser;
  - d. Willing to take NRT as part of a structured guit attempt;
  - e. Assessed as being suitable for NRT.
- 4.4.11 The approved Sunderland NRT Voucher (Appendix 4) must be fully completed, indicating a recommended course of NRT, in compliance with the schedule of interventions (Appendix 1):
  - a. During weeks 1-4 of the quit attempt, vouchers will enable one week's supply of NRT at a time;
  - b. During weeks 5-12 of the quit attempt (i.e., the maintenance period) vouchers will enable two week's supply of NRT at a time;
  - c. The provision of vouchers will be for a maximum of 12 weeks.
  - d. The Service User may request two week's supply during weeks 1-4 of the quit attempt under exceptional circumstances (for example they are going on holiday or being admitted to hospital). The decision to grant such a request is at the professional discretion of the Stop Smoking Adviser, based on a balance of risk and benefits.
  - e. On all occasions, the decision to issue a voucher of recommendation for NRT for an individual Service User rests with the Stop Smoking Adviser providing the stop smoking support.
- 4.4.12 The Stop Smoking Adviser must retain details of the recommended NRT in the Service User's Client Record Form and on the supporting IT system (currently "Call It Quits").

- 4.4.13 The Stop Smoking Adviser must advise the Service User that the voucher is a recommendation and may be changed or declined at the point of dispensing by the Community Pharmacist if the product is deemed to be unsuitable for the Service User.
- 4.4.14 The Stop Smoking Adviser will provide the Service User with a voucher of recommendation and advise the Service User of the participating Community Pharmacies in Sunderland.
- 4.4.15 The Stop Smoking Adviser takes full responsibly for any recommendation that they make through the voucher process.
- 4.4.16 Any voucher of recommendation that is issued by the Stop Smoking Adviser will become void 28 calendar days after the date of issue. Service Users must be advised that the Voucher must be taken to a Community Pharmacy within 28 calendar days of issue in order to receive the NRT products.
- 4.4.17 There is good evidence that combination NRT is more effective than single product NRT. In line with guidance and local training, Stop Smoking Advisers are advised:
  - a. To prescribe patches (prolonged release) with an oral product (immediate release);
  - b. Not to provide two oral products (immediate release) simultaneously;

Where a Service User requests two oral products, the Stop Smoking Adviser must seek advice from the Council's representative organisation (currently the Live Life Well Service) before commencing.

Referral of Recommendation for Extra Support and Assessment of an Individual's Suitability for Bupropion or Varenicline.

- 4.4.18 Stop Smoking Advisers recommending pharmacotherapy must follow the Sunderland Guidance on the Recommendation and Supply of Stop Smoking Medicines for people providing NHS Stop Smoking Services issued during the Sunderland Stop Smoking Service New Adviser Training approved by the Commissioners and provided by the Council's representative organisation (currently the Live Life Well Service).
- 4.4.19 Where prescription only medication (bupropion or varenicline) is recommended as an aid to stop smoking and to help reduce nicotine cravings, the Provider will refer the Service User to their own GP for additional clinical support.
- 4.4.20 Stop Smoking Advisers who do not have a prescribing qualification must refer Service Users to their GP for extra support and assessment of their suitability for prescription only medication (bupropion or varenicline) using the approved letter of recommendation (Appendix 5).

- 4.4.21 Stop Smoking Advisers must advise Service Users that the recommended pharmacotherapy may be considered by their GP to be clinically inappropriate and therefore may be changed or declined based on clinical judgement.
- 4.4.22 Stop Smoking Advisers must advise Service Users that the recommended pharmacotherapy needs to be taken at least one week prior to their quit date.
- 4.4.23 Stop Smoking Advisers must only use the Sunderland NRT Voucher which is prefixed with their unique provider code.

## Prescribing by FP10s for Bupropion or Varenicline

- 4.4.24 All Prescribers who are prescribing as part of the Sunderland NHS Stop Smoking Service must adhere to the Sunderland Guidance on the Recommendation and Supply of Stop Smoking Medicines for people providing NHS Stop Smoking Services and any other relevant local prescribing guidelines (Appendix 3).
- 4.4.25 All Prescribers who are prescribing pharmacological therapy as an aid to stop smoking and to help reduce nicotine cravings must ensure that they maintain their prescribing competence.
- 4.4.26 Stop Smoking Advisers who are also a GP Prescriber or Independent Non-Medical Prescriber must prescribe prescription only pharmacological therapy (bupropion or varenicline) as an aid to stop smoking on an FP10 prescription. All other NRT products must be recommended using the using the Sunderland NRT Voucher Scheme.

## **Controlled Stationery**

- 4.4.27 In order to ensure that the costs of pharmacological products used to deliver the Service are charged to the correct commissioning authority, all recommendations and prescribing within the service will use the appropriate controlled stationery i.e. one of the following:
  - a. An approved Sunderland NRT Voucher for non-prescription NRT products (Appendix 4);
  - b. A prescription pad (FP10) for prescription only medication e.g. varenicline (Champix) & buproprion (Zyban)

#### 4.5 Structured Support

All Service Users receiving NHS Stop Smoking Services will, once they have set a quit date and agreed to take part in the behavioural support programme, be offered and encouraged to participate a programme of structured support. For one to one support this includes four weekly sessions for all Service Users, followed by a further four fortnightly sessions only for Service Users who are successfully quit at 4 weeks.

For Service Users receiving group support, this includes four weekly sessions via a group followed by a further four fortnightly one to one appointments at fortnightly intervals only for Service Users who are successfully quit at 4 weeks.

The Provider will:

- 4.5.1 Offer and encourage the Service User to attend either:
  - a. Four (post-quit) appointments at weekly intervals and of at least 15 minutes duration (Clause 4.1.3 c); or
  - b. At least four (post quit date) group sessions at weekly intervals and of at least one hour duration (Clause 4.1.4 c).
- 4.5.2 Discharge from the Service with an outcome of "not quit" and record on the IT System (currently "Call It Quits") any Service User who has not achieved a successful quit at 4 weeks (Clause 4.6.4 4.6.7).
- 4.5.3 Offer and encourage all Service Users who have achieved a successful quit at 4 weeks to attend a further 4 one to one appointments at fortnightly intervals and of at least 15 minutes duration (Clause 4.1.3 d and Clause 4.1.4 d).
- 4.5.4 Use the national agreed format (Refer to <a href="https://www.ncsct.co.uk/usr/pub/LSSS">www.ncsct.co.uk/usr/pub/LSSS</a> service delivery guidance.pdf) within these appointments or group sessions which includes (but is not limited to):
  - a. Building on the therapeutic relationship with Service User to maintain engagement, provide motivational advice and support;
  - b. Reviewing the Service User's smoking status;
  - c. Verifying the Service User's smoking status by means of carbon monoxide (CO) monitoring;
  - d. Reviewing the Service User's use of pharmacotherapy, including any side effects:
  - e. Reinforcing messages about correct and continued use of pharmacotherapy;
  - f. Ensuring continued access to pharmacotherapy for the Service User via the Sunderland NRT Voucher Scheme or through prescription;
  - g. Discuss and review the Service User's person centred plan of support to stop smoking;
  - h. Provide information on relapse prevention and what to do in the event of relapse.
- 4.5.5 Record all information from the appointment or session on the Client Record Form and add this information to the supporting IT system (currently "Call It Quits").

# 4.6 Completion and Exit

Successful Completion

- 4.6.1 Service Users will be considered to have achieved a successfully quit if the Service User self-reports that:
  - a. They have not smoked at all in the last 2 weeks of the quit attempt (for a 4 week quit);
  - b. They have not smoked at all in the last 10 weeks of the quit attempt (for a 12 week quit).

#### The Provider will:

- 4.6.2 When a Service User achieves a successful quit at 4 weeks:
  - a. Confirm that the Service User remains smoke free using carbon monoxide (CO) verification. The Service has a minimum standard that 85% of self-reported quits must be confirmed by CO monitoring (Clause 2.4.6).
  - b. Record the treatment outcome as either "CO verified 4-week quitter" or "Self-report", based on the outcome of CO monitoring, and add the outcome information to the supporting IT system (currently "Call It Quits");
  - c. Offer and encourage the Service User to attend further support sessions (Clauses 4.1.3 d, 4.1.4.d, 4.5.3 and 4.6.2).
- 4.6.3 When a Service User achieves a successful quit at 12 weeks:
  - a. Confirm that the Service User remains smoke free using carbon monoxide (CO) verification. The Service has a minimum standard that 85% of self-reported quits must be confirmed by CO monitoring (Clause 2.4.5).
  - b. Record the treatment outcome as either "CO verified 4-week quitter" or "Self-report", based on the outcome of CO monitoring, and add the outcome information to the supporting IT system (currently "Call It Quits"):
  - c. Discharge the Service User from the Service and close the Service User's profile on the supporting IT system (currently "Call It Quits").

#### Completion of Treatment but Not Quit

- 4.6.4 Discharge from the Service with an outcome of "not quit" any Service User who has not achieved a successful quit at 4 weeks (Clause 4.6.1 a).
- 4.6.5 Discharge from the Service with an outcome of "not quit" any Service User who has not achieved a successful quit at 12 weeks (Clause 4.6.1 b).

- 4.6.6 Service Users who are discharged with an outcome of "not quit" may re-enter the Service to begin another quit attempt once an assessment of readiness and ability to quit smoking undertaken by the Provider indicates that they are ready to do so.
- 4.6.7 If a Service User has received structured support, in accordance with Clauses 4.2 4.6, from the same NHS Stop Smoking Service for more than 28 weeks through structured support and has an outcome of "not quit", then the Provider must inform the Council's representative organisation (currently the Live Life Well Service) who will be able to advise an alternative approach.

## Disengaged

- 4.6.8 Ensure that Service Users who disengage from the Service are followed up 4 weeks after the last contact with the Service to encouraged re-engagement into structured support.
- 4.6.9 Undertake follow up sessions using any method deemed appropriate, in line with Service User's expressed contact preferences, including (but not limited to):
  - a. Face to face;
  - b. Letter:
  - c. Telephone;
  - d. Voicemail:
  - e. Email:
  - f. Text message.
- 4.6.10 Make at least three attempts, on different days and at different times of day to contact any Service User who has disengaged.
- 4.6.11 When attempts to contact any Service User who has disengaged (Clause 4.6.9) have been unsuccessfully exhausted:
  - Record the treatment outcome as "Lost to follow up" and add the outcome information to the supporting IT system (currently "Call It Quits"):
  - b. Discharge the Service User from the Service and close the Service User's profile on the supporting IT system (currently "Call It Quits").

### Discharge and Exit

- 4.6.12 Ensure that Service Users who are not ready, unable or not willing to continue with a quit attempt may be discharged at any stage of the 12 week programme. In such circumstances, the Provider must contact the Council's representative organisation (currently the Live Life Well Service) to close the Service User's profile on the supporting IT system (currently "Call It Quits").
- 4.6.13 Ensure that Service Users who request to change Stop Smoking Adviser are supported to make the change. The Provider must contact the Council's representative organisation (currently the Live Life Well service) to close the Service User's profile on the supporting IT system (currently "Call It Quits").
- 4.6.14 Ensure that Service Users who have successfully quit at 4 weeks are able to exit the service before 12 weeks, in the event that they no longer require or wish to receive the Service. The Client Record Form for such Service Users must be marked as "No follow up required" and this must be entered onto the supporting IT System (currently "Call it Quits").
- 4.6.15 Where a Service User is discharged from the Service following a successful quit:
  - a. Provide the Service User with information about relapse prevention;
  - b. Signpost the Service User to self-care websites and any other tools for continuation of lifestyle behaviour change;
  - c. Ensure that the Service User is provided with information that enables them to re-access the Service in the event of relapse.
  - d. Encourage the Service Users re-access the Service at the earliest opportunity in the event of relapse.
- 4.6.16 Where a Service User is discharged from the service following an unsuccessful quit attempt:
  - a. Signpost the Service User to self-care websites and any other tools for continuation of lifestyle behaviour change;
  - b. Provide the Service User with contact details for the Service to support future access.
- 4.6.17 Where a Service User is discharged from the Service after disengaging:
  - a. Signpost the Service User to self-care websites and any other tools for continuation of lifestyle behaviour change;
  - b. Provide the Service User with contact details for the Service to support future access.

# 4.7 Electronic Cigarettes

4.7.1 The Sunderland NHS Stop Smoking Service provides support to Service Users who wish to use their own e-cigarettes to help stop smoking or cut down their nicotine intake.

The Provider will:

- 4.7.2 Provide structured behavioural and motivational support in line with Clause 4.5 (4.5.1-4.5.5).
- 4.7.3 Recommend, where clinically appropriate, an NRT product to use in combination with the e-cigarette. Such a recommendation must be made using the Sunderland NRT Voucher Scheme.
- 4.7.4 Provide information and advice on the safe use of e-cigarettes to support a quit attempt.

The Provider must not:

4.7.5 Use the Sunderland NRT Voucher Scheme to make a recommendation for an e-cigarette as part of this Service. The Council will not pay for e-cigarettes.

#### 5 INTERDEPENDENCIES WITH OTHER SERVICES

- In order to deliver a holistic Service the Provider must have strong working relationships with a range of partners including but not limited to:
  - a. Sunderland Integrated Wellness Model (currently Live Life Well)
  - b. General Medical Practices
  - c. Community Pharmacies
  - d. City Hospital Sunderland
  - e. Northumberland, Tyne and Wear Mental Health Trust
  - f. Sunderland City Council
- 5.2 Staff delivering the Service should promote improving health wherever possible and it will be the responsibility of the Provider to facilitate onward referrals into other general health care services, where required.

# 5.3 Referral Systems

The following systems can all be used to drive referrals of smokers into NHS Stop Smoking Services.

- 5.3.1 Health Checks The NHS Health Check is a national risk assessment and prevention programme for people aged between 40 and 74 years of age to identify anyone at risk of heart disease, stroke, kidney disease, diabetes and certain types of dementia. Following assessment, anyone identified as at risk should receive advice on achieving and maintaining a healthy lifestyle, including advice about stopping smoking if relevant.
- 5.3.2 Healthcare Settings The Provider will accept referrals from Service Users who begin their quit attempt in another healthcare setting e.g. acute hospital inpatient, mental health trust inpatient (Clause 4.1.6 4.1.7).

#### **6 EQUIPMENT AND FACILITIES**

# 6.1 General Equipment and Facilities

- 6.1.1 Have access to equipment to undertake the NHS Stop Smoking Service including (but not limited to):
  - a. Carbon monoxide (CO) Monitor
  - b. Consumables e.g. cardboard tubes and wipes
- 6.1.2 Ensure that all equipment used to undertake the NHS Stop Smoking Service is fully functional, used regularly, CE marked (meaning "European Conformity"), validated, maintained and calibrated according to the manufacturer's instructions.
- 6.1.3 All equipment provided by the Council's representative organisation (currently the Live Life Well service) to deliver the Stop Smoking Service remains the property of the Council.
- 6.1.4 Ensure that CO monitors are calibrated according to manufacturer's guidance annually to ensure accurate recording of results. Calibration will be carried out at refresher training or on quarterly mentoring visits. Support to calibrate equipment can be obtained via the Council's representative organisation (currently the Live Life Well service) if required in between routine calibration dates.
- 6.1.5 Ensure that equipment is used in compliance with standard operating procedures, the manufacturer's instructions and handling instructions for machines.

- 6.1.6 Identify an individual member of Staff to act as a named point of contact for CO monitor and consumables.
- 6.1.7 In the event of a fault with a CO Monitor work through the following steps as appropriate:
  - a. Refer to the third party provider's frequently asked questions guide to resolve the fault based on solutions to common error messages;
  - b. Contact the Council's representative organisation (currently the Live Life Well Service) to arrange a maintenance support visit and possible equipment loan.
- 6.1.8 Ensure equipment is only used by Staff who have been trained and are competent in its use.
- 6.1.9 Return any Carbon Monoxide monitors that are no longer in use to the Council's representative organisation (currently the Live Life Well service).
- 6.1.10 For information about consumables please contact the Council's representative organisation (currently the Live Life Well service) on 0800 107 0741 or 0191 565 3482.

## 6.2 Facilities Requirements

The Provider will:

- 6.2.1 Ensure that a consulting room is available for the delivery of the Service and assessments and on-going interventions are carried out within the consulting room.
- 6.2.2 Ensure that materials are available to provide advice and information in relation to smoking, its associated harms and support options to quit.
- 6.2.3 Ensure that the Sunderland Voucher of Recommendation is available in the event that the service user requires access to Nicotine Replacement Therapy.

# 6.3 Recording and Reporting Data

- 6.3.1 The Council separately commissions an IT System (currently "Call It Quits") which supports delivery and payments for NHS Stop Smoking Service including (but not limited to):
  - a. Collection of activity data on behalf of the Council;
  - b. Data extraction for local monitoring, reporting on minimum data sets requirements, evaluation and quality assurance of the NHS Stop Smoking Service.

#### The Provider will:

- 6.3.2 Use the Council's commissioned IT System (currently "Call It Quits") to record activity for the NHS Stop Smoking Service. All activity must be recorded on the Call It Quits system ensuring all of the mandatory fields are completed.
- 6.3.3 Work with the Council's commissioned IT System Provider, and other relevant IT Support Providers, to ensure that the commissioned IT System (currently "Call It Quits") is fully installed and operational.
- 6.3.4 Ensure that Staff conducting the NHS Stop Smoking Service have undertaken Sunderland Stop Smoking Service New Adviser Training approved by the Council and provided by the Council's representative organisation (currently the Live Life Well Service). This training includes the use of the IT System. After training has been completed an account must be set up on the IT System (currently "Call It Quits") by the Council's representative organisation (currently the Live Life Well service) for the Provider.

#### 7 GOVERNANCE ARRANGEMENTS

# 7.1 Legislation and Clinical Guidance

- 7.1.1 In line with the Department of Health and National Institute of Clinical Excellence guidelines, the Provider must operate in compliance within the following core guidance documents (including but not limited):
  - a. A Smokefree Future a Comprehensive Tobacco Control Strategy for England (DH, February 2011)
  - b. Healthy lives, healthy people: a tobacco control plan for England (Department of Health, 2011)
  - c. Stop Smoking Service Delivery and Monitoring Guidance 2011/12 (DH, March 2011)
  - d. Excellence in Tobacco Control: 10 High Impact Changes (May 2008)
  - e. NICE public health intervention guidance 10: Smoking cessation services in primary care, pharmacies, local authorities and workplaces, particularly for manual working groups, pregnant women and hard to reach communities (2008)
  - f. NICE public health intervention guidance 1: Brief Interventions and referral for smoking cessation in primary care and other settings (March 2006)
  - g. PH5 Workplace interventions to promote smoking cessation (NICE, 2007)
  - h. NICE public health guidance 6: Behaviour change (Oct 2007) (covers individual level, community level and population level programmes, planning, delivery and evaluation)
  - i. TA123 Smoking cessation varenicline (NICE, 2007)
  - j. NICE public health guidance 26: Quitting smoking in pregnancy and following childbirth (2010)

- k. NICE public health guidance 39: Smokeless tobacco cessation South Asian communities (2012)
- I. NICE public health guidance 45: Tobacco harm reduction (2013)
- m. QS43 Smoking cessation: supporting people to stop smoking (NICE, 2013)

The Provider must adopt and operate in compliance with new guidance documents as these are published and advised by the Council's representative organisation (currently the Live Life Well Service).

# 7.2 Programme Governance

- 7.2.1 Manage interventions efficiently with sufficient administrative support for general organisation, Service User contact processes and data handling.
- 7.2.2 Ensure that all Service Users are provided with an initial appointment for assessment within 48 hours of receipt of referral; this appointment must be at least 30 minutes in length.
- 7.2.3 Liaise with the Council's representative organisation (currently the Live Life Well Service) to ensure that all staff delivering the NHS Stop Smoking Service are trained and competent, in line with local procedures.
- 7.2.4 Liaise with the Council's representative organisation (currently the Live Life Well service) to ensure that all equipment and facilities used to deliver the Service meet determined standards
- 7.2.5 Liaise with the Council's representative organisation (currently the Live Life Well service) to ensure that contact details are up to date so that the Council's representative organisation (currently the Live Life Well service) is able to signpost individuals to the Service and advice on what is offered.
- 7.2.6 Local level governance for the programme is through the NHS Stop Smoking Pathway. This is currently managed by the Council's representative organisation (currently the Live Life Well Service) and delivered by Live Life Well Mentors.
- 7.2.7 The role of the mentor is to quality assure the Service and provide guidance to Providers on the operational delivery (figure 2) including but not limited to:
  - a. Ensuring minimum standards are met around individual outcomes:
  - b. Competent in the use of the database 'Call It Quits';
  - c. Use of NRT vouchers:
  - d. Compliance in core training;
  - e. Providing local Stop Smoking resources;
  - f. Providing local marketing/campaign materials.

Mentorship **Support Pathway** Phone call with "NHS Stop Smoking Monthly Champion" **Training and workforce development Mentorship session** 1 month Quality Assurance **Mentorship session** 4 months 8 months Mentorship session **Mentorship session** 12 months and annual review

Figure 2: Local Quality Assurance Process for NHS Stop Smoking Services

#### 8. QUALITY AND SAFETY

### 8.1 Workforce

- 8.1.1 Each Provider will be accountable for ensuring that their skills and knowledge are up to date by:
  - a. Ensure that staff involved in the delivery of the Service have attended the core training and have the relevant knowledge and any equipment needed to deliver the Service.
  - b. Ensure that staff involved in the provision of the Service are aware of and act in accordance with local protocols and national guidance.
- 8.1.2 Ensure that all staff delivering the NHS Stop Smoking Service meet the required minimum standards as set out by the NHS Centre for Smoking Cessation and Training.
- 8.1.3 Ensure that knowledge and skills required for the Service can be verified using the Declaration of Competence (DoC) system to assure the Council that the Provider's Staff are competent to deliver the Service (Appendix 6A and Appendix 6B).

- 8.1.4 Ensure that all staff delivering the NHS Stop smoking Service demonstrate compliance with the following requirements:
  - a. All staff delivering the NHS Stop Smoking Service complete the NHS Stop Smoking Service Core Training provided by the Council's representative organisation (currently the Live Life Well Service) or the completed the Stop Smoking National Centre for Smoking Cessation and Training (NCSCT) practitioners assessment: knowledge and skills before commencing service delivery. This training is available at no cost to the Provider and is will to cover the Core and Technical Competencies required.
  - b. All staff delivering the NHS Stop Smoking Service maintain competency and stay up-to-date with programme developments by attending annual Stop Smoking Refresher Training delivered by the Council's representative organisation (currently the Live Life Well Service).
  - c. All staff delivering the NHS Stop Smoking Service must complete the free online NCST Brief Advice on Smoking training module and Stop smoking practitioner training available on http://elearning.ncsct.co.uk/england
  - d. All staff consider and manager safeguarding adults and children at all times in line with the requirements stated in the General Specification (Clause 11.5) and in accordance with local safeguarding procedures.
  - e. All staff delivering the NHS Stop Smoking Service are registered as active advisers on the Call it Quits Systems and adhere to the quality principles stated in training (in the circumstance that a Stop Smoking Service Advisor has been inactive for a period of 3 months they will be contacted to review their Advisor status if inactive for 6 months a Stop Smoking Mentor visit will be required).
  - f. Any advisers who have been inactive for a period of one year or more complete the 2 day new advisor training to continue practising as an advisor.
- 8.1.5 The Provider must ensure that Staff are trained in dealing with Service Users in a person-centred, user-friendly, confidential and non-judgmental manner.
- 8.1.6 The Provider will work towards the principles of the You're Welcome Quality Criteria. Refer to <a href="www.youngpeopleshealth.org.uk/yourewelcome/">www.youngpeopleshealth.org.uk/yourewelcome/</a>.

#### 9 QUALITY REQUIREMENTS

9.1 The Provider will ensure that the Service is delivered in line with the following quality requirements:

No	Quality Measures	Frequency	Methodology
1a	Undertake an initial assessment for	Provided to	Activity recorded
	all new Service Users, and Service	each Service	via Call it Quits.
	Users must receive one to one	User	

No	Quality Measures	Frequency	Methodology
	support on a weekly basis up to 4 weeks and then bi weekly support until 12 weeks		
1b	Undertake an initial assessment for all new Service Users, and Service Users must receive group support on a weekly basis up to 4 weeks and then bi-weekly support until 12 weeks	Provided to each Service User	Activity recorded via Call it Quits.
1c	Co-operation with the Council's representative organisation (currently the Live Life Well Service) and adherence to Governance Requirements (Clause 7.2).	Monthly	Mentoring scheme provided by the Council's representative organisation (currently the Live Life Well Service)
1d	Ensure that Between 35% and 70% of those who set a quit date successfully quit at 4 weeks	On-going	Activity recorded via Call it Quits.
	The successful quits at 4 weeks are expected to be within the 35% to 70% range. Those advisors whose rates fall below 35% will be contacted to be provided with additional mentor support, and those rates above 70% will also be analysed to capture any best practice delivered to achieve these rates. Services falling below 45% will be offered mentoring support.		
1e	Ensure that at least 30% of those who set a quit date successfully quit at 12 weeks	On-going	Activity recorded via Call it Quits.
1f	At least 85% of 4 week quitters validated by CO monitoring	On-going	Activity recorded via Call it Quits.
2a	Maintain competency by completing relevant training and update training as highlighted with the training section of the specification	At commencement of service and in line with Declaration of Competency Requirements	Declaration of Competency checklists completed by provider and supplied to the Council.

No	Quality Measures	Frequency	Methodology
2b	Ensure that at each adviser supports 20 people to set a quit date	Annual	Mentoring scheme provided by the Council's representative organisation (currently the Live Life Well Service)
3	Participate in audits of Service provision.	Annual	The Council will audit the Service to ensure that delivery is in line with the service specification.  The Provider will ensure that access to premises and any relevant information is made possible to Council staff.
4	Co-operate with any locally agreed assessment of Service User experience.	As required by the Council	The Council will inform the Provider in the event of any Service User experience exercises and ensure that access to premises and any relevant information is made possible to Council staff or their appointed representatives.
5	Ensure there is an appropriate consultation area made available to ensure that the needs of individuals are able to be assessed in a confidential manner.	At commencement	The Provider will ensure that access to premises and any relevant information is made possible to Council staff for

No	<b>Quality Measures</b>	Frequency	Methodology
			the purposes of verification.
6	Complete all necessary paperwork and collect data as agreed, to enable monitoring and evaluation of the Service	Each individual assessment	Activity recorded via Call it Quits.
7	The Provider must maintain appropriate records to ensure effective on-going service delivery and audit. Records will be confidential and must be stored securely and for the length of time expressed in local authority record retention policies	On-going	Activity recorded via Call it Quits.  The Council will audit the service to ensure that delivery is in line with the service specification.  The provider will ensure that access to premises and any relevant information is made possible to Council staff.
8	Providers may need to share relevant information with other professionals and agencies, in line with locally determined confidentiality arrangements, including, where appropriate, the need for the consent of the Service User to share the information	On-going	The Council will audit the service to ensure that delivery is in line with the service specification.  The provider will ensure that access to premises and any relevant information is made possible to Council staff.

#### 10 DATA REPORTING

- 10.1 Use the commissioned IT System (currently "Call It Quits") to support the delivery of the NHS Stop smoking Service for recording data.
- The Provider will submit data on a monthly basis via the IT System (currently "Call It Quits") and any other systems, as agreed with the Council.
- 10.3 Ensure that key data items are entered onto the supporting IT System (currently "Call It Quits") including (but not limited to):
  - a. Provider Code:
  - b. Adviser name;
  - c. Adviser contact details;
  - d. Advisers unique ID number;
  - e. Service User's name:
  - f. Service User's date of birth,
  - g. Service User's address;
  - h. Service User's postcode;
  - i. Service User's contact details:
  - j. Service User's GP Practice;
  - k. Age;
  - I. Gender,
  - m. Ethnicity;
  - n. Occupation; Applicable exemptions from prescription charges;
  - o. Pregnant/ breastfeeding; Health Issues (mental/physical);
  - p. How the Service User heard about the Service;
  - q. Date of last tobacco use;
  - r. Agreed quit date;
  - s. Planned date of 4 week follow-up;
  - t. Planned date of 12 week follow-up;
  - u. Type of intervention;
  - v. Type of pharmacological support used;
  - w. Use of other unlicensed nicotine containing products (e.g. e-cigarettes);
  - x. Carbon Monoxide reading.

#### 11 PRICING AND PAYMENT

#### 11.1 Price Schedule

- 11.1.1 The fee per guit undertaken in line with the specification will be:
  - a. £15.50 for each Service User setting a guit date and;
  - b. £41 for each Service User to successfully quit at 4 weeks and
  - c. £41 for each Service User to successfully quit at 12 weeks.

# 11.2 Payment Terms

- 11.2.1 Payment for the Service will be made monthly in arrears.
- 11.2.2 The Provider must upload all data within 7 days of the end of each month to ensure it is available to the Council for download.
- 11.2.3 The Council will access its Contracted Provider's IT System (currently "Call it Quits") following the Provider uploading data (Clause 11.2.2) to access automatically generated invoices and supporting data (Terms and Conditions 15.4).
- 11.2.4 Payment to the Provider will be made no later than 30 days following the date of receipt of the invoice by the Council (Terms and Conditions 15.4).
- 11.2.5 Where data is not submitted within the required timescales (clause 11.2.2) activity data will be retained and payment will be made in the following month.

# **APPENDIX 1**

# **SCHEDULE OF INTERVENTIONS**

# One to One

Week No	Amount of Time of at Least	Voucher Amount	Number of NRT Days
Initial	30 minutes	0	0
assessment			
Second	20 minutes	0	0
appointment to			
set a quit date			
Week 0	15 minutes	1 weeks supply	1 to 7
Week 1	15 minutes	1 weeks supply	8 to 14
Week 2	15 minutes	1 weeks supply	15 to 21
Week 3	15 minutes	1 weeks supply	22 to 28
Week 4	15 minutes	2 weeks supply if on 12	29 to 42
		week programme.	
After 4 Weeks the Service User should be seen 2 Weekly			
Week 6	15 minutes	2 weeks supply	43 to 56
Week 8	15 minutes	2 weeks supply	57 to 70
Week 10	15 minutes	2 weeks supply	71 to 84
Week 12	15 minutes	No Voucher but Co	Finish NRT
		reading and sign off	

# Groups

Week No	Amount of Time of at Least	Voucher Amount	Number of NRT Days	
Initial	30 minutes	0	0	
assessment				
Second	20 minutes	0	0	
appointment to				
set a quit date				
Week 0	15 minutes	1 weeks supply	1 to 7	
Week 1	60 minutes	1 weeks supply	8 to 14	
Week 2	60 minutes	1 weeks supply	15 to 21	
Week 3	60 minutes	1 weeks supply	22 to 28	
Week 4	60 minutes	2 weeks supply if on 12	29 to 42	
		week programme.		
After 4 Weeks tl	After 4 Weeks the Service User should be seen 2 Weekly			
Week 6	15 minutes	2 weeks supply	43 to 56	
Week 8	15 minutes	2 weeks supply	57 to 70	
Week 10	15 minutes	2 weeks supply	71 to 84	
Week 12	15 minutes	No Voucher but Co reading and sign off	Finish NRT	

#### **APPENDIX 2A**

# SPECIMEN TRANSFER LETTERS FROM NORTHUMBERLAND, TYNE AND WEAR NHS FOUNDATION TRUST

[NAME OF SERVICE OR DEPARTMENT]
[ADDRESS LINE 1]
[Address Line 2]
[Town]
[Postcode]

[Tel:] [Fax:]

Date

# Dear [SERVICE USER NAME],

You have requested support to continue to be smokefree once you have been discharged. This letter is to provide you with details of where you can access this support in the community.

- You have been smokefree since [Date]
- You have been using [List NRT products & strength]

**Important:** If you are taking either Clozapine or Olanzapine it is very important that you inform your Care Coordinator if you decide to start smoking again. This is because your medication levels could be affected and will need to be monitored.

Your Care Coordinators contact details are:

#### [Insert name & contact tel.no.]

# [Delete below as appropriate]

Northumberland	You have been referred to Northumberland Stop Smoking
Stop Smoking	<b>Service</b> . Someone from the stop smoking service will contact you
Service	to arrange an appointment.
01670 813135	
Newcastle Stop	You have been referred to Newcastle Stop Smoking Service
Smoking Service	(Lifeline). Someone from the stop smoking service will contact
(Lifeline)	you to arrange an appointment.
0191 269 1103 /	
07809 105837	

North Tyneside	You can access stop smoking support through a number of <b>Local Community Pharmacies</b> in North Tyneside. The nearest one to your home address is:  [Insert Pharmacy Name, address and Tel. No.] Drop in to the pharmacy, at any time during opening hours, with this letter to access stop smoking support.
South Tyneside Change 4 Life Service 0191 424 7300	You have been referred to the <b>Change 4 Life South Tyneside</b> service. Someone from the service will contact you to discuss the services that are available in your area.
Gateshead Livewell Service 0800 014 9092	You have been referred to the <b>Gateshead Livewell Service</b> . Someone from the service will contact you to discuss the services that are available in your area.
Sunderland Live Life Well Service 0191 565 3482 / 0800 107 0741	You can access stop smoking support through a number of <b>Local Community Pharmacies</b> in Sunderland. The nearest one to your home address is:  [Insert Pharmacy Name, address and Tel. No.] Drop in to the pharmacy, at any time during opening hours, with this letter to access stop smoking support. More information can be found at <a href="https://www.livelifewell.org.uk">www.livelifewell.org.uk</a> .

Yours sincerely,

[Insert NTW staff Name & Role]

#### **APPENDIX 2B**

### SPECIMEN TRANSFER LETTERS FROM HEALTH CARE SETTINGS

#### [NAME OF SERVICE OR DEPARTMENT]

[ADDRESS LINE 1]
[Address Line 2]
[Town]
[Postcode]

[Tel:] [Fax:]

Date xxx

#### Dear [SERVICE USER NAME],

You have requested support to continue to be smokefree once you have been discharged. This letter is to provide you with details of where you can access this support in the community, as:

- You have been smokefree since [Quit Date].
- You have been using [List NRT products & strength].

You can access NHS Stop Smoking Services through a number of Local Community Pharmacies in Sunderland. YOU MUST PRESENT THIS LETTER TO THE NHS STOP SMOKING ADVISOR TO CONTINUE THE SUPPORT TO STOP SMOKING.

To find your nearest NHS Stop Smoking Service contact Sunderland Live Life Well Service 0191 565 3482 / 0800 107 0741 or visit <a href="www.livelifewell.org.uk">www.livelifewell.org.uk</a> for more information.

Please share any important information about healthcare conditions, treatment or medications that are relevant to the quit attempt with your new Stop Smoking Adviser.

Yours sincerely,

[Insert staff Name, Role & Contact Number]

# APPENDIX 3 AGREED LIST OF PHARMACOTHERAPIES FOR USE WITHIN THE SUNDERLAND NHS STOP SMOKING SERVICE

All Nicotine Replacement Therapy product prices are set as of May 2017 in accordance to NHS Dictionary of Medicines and Devices. Prices are updated on a weekly basis and will automatically reflect the Council's commission IT System (currently "PharmOutcomes").

Preparation	Strength	Maximum Daily Dose	Instructions	Comments	Price
Patches	10mg/16 hours 15mg/16 hours 25mg/16 hours	•	<ul> <li>Apply on waking to dry, non-hairy skin on hip, chest or upper arm, and remove 16 hours later, usually before bedtime.</li> <li>Rotate sites</li> </ul>	<ul> <li>Suitable for smokers with regular smoking pattern and low level of behavioural dependence.</li> <li>Patches give a constant release of nicotine. Not suitable for occasional smokers</li> </ul>	Brand: Nicorette Invisi • Prices are for 7 patches • 10mg/16 hours - £10.99 • 15mg/16 hours - £11.10 • 25mg/16 hours - £11.15
Patches	7mg/24 hours 14mg/24 hours 21mg/24 hours	· ·	11	<ul> <li>Recommended for those who smoke within 30 minutes of waking or smoke at night.</li> <li>Patches give a constant release of nicotine. Not suitable for occasional smokers</li> </ul>	Brand: NiQuitin • £9.97 for 7 patches

Preparation	Strength	Maximum Daily Dose	Instructions	Comments	Price
Sublingual tablets (microtabs)	2mg tablets	40 tablets in 24 hours	<ul> <li>Tablet should be placed under the tongue and allowed to slowly dissolve.</li> <li>It should be moved around under the tongue to prevent irritation.</li> <li>For patients smoking ≤ 20 cigarettes daily, 2mg every hour. Can be increased to 4mg every hour in patients who fail to stop smoking or have significant withdrawal symptoms.</li> <li>For patients smoking ≥ 20 cigarettes daily, 4mg every hour.</li> </ul>	<ul> <li>Continue treatment for up to 3 months before reducing the dose</li> <li>It is discreet and flexible and provides good dose control</li> </ul>	Brand: Nicorette Microtabs • £13.12 for 100 tablets
Lozenges	1.5mg, 2mg 4mg	15 lozenges daily	<ul> <li>Put lozenge in mouth and allow to slowly dissolve;</li> <li>periodically move it from one side of the mouth to the other.</li> <li>Lozenge should not be chewed or swallowed whole</li> </ul>	<ul> <li>Lozenges last 10-30 minutes depending on size.</li> <li>Continue treatment for 6-12 weeks before attempting dose reduction</li> <li>Users should not eat or drink while the lozenge is in the mouth</li> </ul>	Brand: NiQuitin • £9.97 for 72 1.5mg, 2mg 4mg
Mini- Lozenges	4mg and 1.5mg	15 lozenges daily	Put lozenge in mouth and allow to slowly dissolve;	Lozenges last 10-30 minutes depending on size.	Brand: NiQuitin Minis • £3.50 for 20 4mg and 1.5mg

Preparation	Strength	Maximum Daily Dose	Instructions	Comments	Price
			<ul> <li>periodically move it from one side of the mouth to the other.</li> <li>Lozenge should not be chewed or swallowed whole</li> </ul>	<ul> <li>Continue treatment for 6-12 weeks before attempting dose reduction</li> <li>Suitable for smokers who smoker 20 cigarettes or less per day</li> <li>Users should not eat or drink while the lozenge is in the mouth</li> </ul>	• £9.57 for 60 4mg and 1.5mg
Nicotine medicated gum	2mg 4mg	15 pieces of either strength	<ul> <li>Chew one piece when the urge to smoke occurs.</li> <li>Chew until a peppery/ tingling feeling occurs, flatten and park between the gum and the cheek.</li> <li>Chew and park several times per piece. Nicotine is released over 30 minutes of slow intermittent chewing - to release taste.</li> </ul>	<ul> <li>Allows good control of nicotine dose.</li> <li>Not permitted on mental health wards.</li> </ul>	Brand: Nicotinell  £8.26 for 96 2mg pieces  £10.26 for 96 4mg pieces
Nicotine nasal spray	0.5mg/ spray	64 sprays daily	<ul> <li>Tilt head and use one squirt in each nostril when the urge to smoke occurs, up to twice an hour for 16hours/ day.</li> <li>When withdrawing from therapy, the dose can be</li> </ul>	<ul> <li>Rapid nicotine delivery         <ul> <li>better for very             dependent smokers.</li> </ul> </li> <li>Recommended for         <ul> <li>those who smoke ≥ 20</li> <li>cigarettes a day</li> </ul> </li> </ul>	Brand: Nicorette • £14.84 for 1x10ml spray

Preparation	Strength	Maximum Daily Dose	Instructions	Comments	Price
			gradually reduced to 1 spray in 1 nostril.		

#### **APPENDIX 4**

#### APPROVED SUNDERLAND NRT VOUCHER

#### SUNDERLAND NRT VOUCHER OF RECOMMENDATION



Please complete in BLOCK CAPITALS.

LLW Voucher No.		/	of 8	
Date of issue:	/		/	

		Date of issue	e: / /
Provider Details: Voucher	is only valid for 28 cal	endar days from th	ne date of issue
Advisor Name:			
Contact Number:			
Organisation name and add			
		Postcode:	
Client Details			
Forename(s):	Su	mame:	
Date of Birth:	Ag	e:	
Address:			
		_ Postcode: _	
G.P. Practice:	Ad	dress:	
Is the patient pregnant? Y	es / No / NA		
If pregnant: The risks and	benefits of using NRT d	uring pregnancy ha	ve been discussed with
this client Yes / No			
Product(s): Weeks 1 - 4	(1 weeks supply ONLY	) Weeks 5 - 12 (2 v	weeks supply ONLY)
Product	Strength	Pack Size	Number of Packs
NRT Patch 16 hours			
THEFT ALGORITO HOURS			
NRT Patch 24 hours			
NRT Patch 24 hours			
NRT Patch 24 hours NRT Microtab			
NRT Patch 24 hours NRT Microtab NRT Lozenges			
NRT Patch 24 hours NRT Microtab NRT Lozenges NRT Mini Lozenges			
NRT Patch 24 hours NRT Microtab NRT Lozenges NRT Mini Lozenges NRT Gum			
NRT Patch 24 hours NRT Microtab NRT Lozenges NRT Mini Lozenges NRT Gum NRT Nasal Spray			
NRT Patch 24 hours NRT Microtab NRT Lozenges NRT Mini Lozenges NRT Gum NRT Nasal Spray			
NRT Patch 24 hours NRT Microtab NRT Lozenges NRT Mini Lozenges NRT Gum NRT Nasal Spray			
NRT Patch 24 hours NRT Microtab NRT Lozenges NRT Mini Lozenges NRT Gum NRT Nasal Spray Other			
NRT Patch 24 hours NRT Microtab NRT Lozenges NRT Mini Lozenges NRT Gum NRT Nasal Spray Other  Client Receipt of Vouche	N/A Client Signature:_		
NRT Patch 24 hours NRT Microtab NRT Lozenges NRT Mini Lozenges NRT Gum NRT Nasal Spray Other  Client Receipt of Vouche	N/A Client Signature:_		

### PHARMACY USE ONLY

Supplie	ed by:						
Signatu	re:	Pharm	acy stamp				
Name:	ame:						
Date of	issue:						
Tel.:							
Don't p	pay – Indicate exemption category (p	out X mark)					
A	is under 16 years of age						
В	is 16, 17 or 18 and in full-time educ	eation					
С	is 60 years of age or over						
D	has a maternity exemption certification	ate					
E	has a medical exemption certificat	е					
F	has a prescription pre-payment ce	rtificate					
G	has a valid War Pension exemption	certificate					
L	is named on a current HC2 charge	certificate					
н	gets Income Support						
K	gets Income Based Jobseeker's Al	lowance (JSA(IB))					
М	is entitled to, or named on, a valid	NHS Tax Credit Exen	nption Certificate				
S	has a partner who gets Pension Cr	edit guarantee credit	(PCGC)				
Payme	nt: I have paid £						
I am the	: Patient  Patient's represen	tative					
Signed:		Date:					
Address	if different from above:						
For Pharmacy use only							
Cross if evidence of exemption not seen?   Date submitted to PharmOutcomes for payment / /							
. ,							
For LL	W use only						

#### APPENDIX 5

### LETTER OF RECOMMENDATION FOR REQUEST FOR BUPROPION OR VARENICLINE





Sunderland NHS Stop Smoking Service Initial Recommendation Request Form – Varenicline or Bupropion

## THE CLIENT UNDERSTANDS THIS FORM DOES NOT GUARANTEE THAT VARENICLINE (CHAMPIX) or BUPROPION (ZYBAN) WILL BE PRESCRIBED

Live Life Well Stop Smoking Service 12 John Street Sunderland SR1 1HT

Tel: 0191 565 3482 Freephone: 0800 107 0741

Provider Location:Adviser Name:	Contact No: Today's Date:
Dear Doctor,	
This is a letter for an initial prescription red (Zyban) for the named client.	quest of Varenicline Tartrate (Champix) or Bupropion
Client Name:	NHS No:
Tel No:	D.O.B:

I am currently seeing the above named client for stop smoking support. Following assessment and discussion with the client, I would be grateful if you would consider prescribing either Varenicline Tartrate (Champix) or Bupropion (Zyban) to support their quit attempt.

If you feel that **Varenicline** is suitable for this client, could you please prescribe the following - Initiation Pack (14 Day Supply)

- Day's 1-3 0.5mg tablet once daily
- Day's 4-7 0.5 mg tablet twice daily
- Day's 8-14 1mg tablet twice daily

If you feel that **Bupropion** is suitable for this client, could you please prescribe the following:

• 2 week prescription of Bupropion (30 tablets)

In line with the Stop Smoking Service Guidance, I will act as their Stop Smoking Adviser and will monitor their progress. I will contact you if they remain quit at 2 weeks (validated by carbon monoxide reading) and ask for a further prescription.

Many thanks for your support in this matter.

**Stop Smoking Adviser** 



**Client Signature:** 

Date:



Has the client been prescribed <b>Varenicline</b> Has the client been prescribed <b>Bupropion</b>		Yes / No / Unknown Yes / No / Unknown
Contraindications/Precautions		
Is the client under 18 years old?  Does the client have end-stage renal disease is the client pregnant?  Is the client breastfeeding?  Does the client have a history of mental head poes the client have a history of epilepsy?		Yes / No / Unknown Yes / No / Unknown
Additional Information:		
Stop Smoking Adviser Signature:		
Date:		
Client Declaration		
I confirm that the information given to the a time of assessment.	adviser is correct to best	of my knowledge at the

#### **APPENDIX 6A**

### DECLARATION OF COMPETENCE - NHS STOP SMOKING SERVICES IN GENERAL PRACTICE

Sunderland City Council is using a locally developed Declaration of Competence (DoC) system to review health professionals' competence to deliver locally commissioned services and to gain assurance that they have the appropriate knowledge, skills and behaviours to deliver high-quality, consistent services.

Each Public Health service has a framework that sets out the core professional competencies required for that service. The framework allows self-assessment of competence and outlines the recommended learning to enable self-declaration.

This DoC is based on the National Centre for Smoking Cessation and Training (NCSCT) competence framework which is linked to the NHS Knowledge and Skills Framework endorsed by the Department of Health. Supporting resources can be downloaded from NCSCT website using the links below:

Stop Smoking National Centre for Smoking Cessation and Training (NCSCT) practitioners assessment: knowledge and skills	http://www.ncsct.co.uk/publication_training-and-assessment-programme.php
Live Life Well Service	http://www.livelifewell.org.uk/

The training requirements to meet the competencies in the DoC and enable self-certification, to deliver the NHS Stop Smoking Service in Sunderland are listed below in box 1.

#### **Box 1: Learning and Assessments**

#### **Core Competences**

 Complete the Stop Smoking National Centre for Smoking Cessation and Training (NCSCT) practitioners assessment: knowledge and skills

#### or

 Complete the Sunderland Stop Smoking Service New Adviser Training coordinated by the Live Life Well Service.

#### Staying up-to-date

 Attend annual Sunderland Stop Smoking Refresher Training co-ordinated by the Live Life Well Service

#### Basic Awareness (Alerter) Training in Safeguarding Adults (level 1)

Complete the <u>Sunderland Safeguarding Adults Board e-learning</u> (45 minutes).

#### **Basic Awareness (Foundation) Training in Safeguarding Children**

 Complete the Sunderland Safeguarding Childrens Board approved Training <u>www.safeguardingchildrensunderland.com</u> in Safeguarding Childrens (1 to 2 hours)

#### Pre-reading

 Read and understand the Gillick Competence and are able to assess young people under the age of 16 years for Gillick Competence. Refer to <a href="https://www.cqc.org.uk/content/nigels-surgery-8-gillick-competency-and-fraser-guidelines">www.cqc.org.uk/content/nigels-surgery-8-gillick-competency-and-fraser-guidelines</a>

#### Standard Operating Procedure for Self-Certification

 Download and review the Stop Smoking National Centre for Smoking Cessation and Training (NCSCT) practitioners assessment: knowledge and skills competence framework and supporting resources from the NCSCT website using the links below:

Stop Smoking	National Centr	re for	http://www.ncsct.co.uk/usr/pub/NCSCT-
Smoking Cess	sation and Tra	ining	competences-for-STP.pdf
(NCSCT)	practitio	ners	
assessment: skills	knowledge	and	

- 2. Identify any learning needs and refer to the training requirements for guidance.
- 3. Complete any necessary training.
- 4. Print and sign or electronically sign this Declaration of Competence statement.
- 5. Upload the following documentation to the NEPO portal or send to Public Health Commissioning Room 3.103, Civic Centre, Sunderland, SR2 7DN or email to: <a href="mailto:PHenquiries@sunderland.gov.uk">PHenquiries@sunderland.gov.uk</a>
  - Signed Declaration of Competence statement;
  - Course certificate(s).
- 6. The Council will issue a letter of authorisation to enable provision of the service on receipt and approval of the above documentation.
- 7. The authorisation will be valid for three years. If however there have been major changes to the service specification, staff will be expected to revisit the declaration of competence and resubmit it.

I have the necessary knowledge and skills to provide NHS Stop Smoking Service and can demonstrate these skills. I acknowledge that it is my responsibility to update my knowledge and skills on an on-going basis and to formally renew my Declaration of Competence for the Service every 3 years.

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(Scanned or typed signature acceptable)

Name

Position

Date

For and on behalf of

Address of Organisation

**Email Address** 

#### **APPENDIX 6B**

### DECLARATION OF COMPETENCE - NHS STOP SMOKING SERVICES IN COMMUNITY PHARMACY - PHARMACISTS AND PHARMACY TECHNICIANS

Sunderland City Council is using a locally developed Declaration of Competence (DoC) system to review health professionals' competence to deliver locally commissioned services and to gain assurance that they have the appropriate knowledge, skills and behaviours to deliver high-quality, consistent services.

Each Public Health service has a framework that sets out the core professional competencies required for that service. The framework allows self-assessment of competence and outlines the recommended learning to enable self-declaration.

The **training requirements** to meet the competencies in this DoC and enable self-certification to deliver the Public Health commissioned **NHS Stop Smoking Services** in Sunderland are set out below in boxes 1 and 2:

#### **Box 1: Learning and Assessments - Safeguarding**

#### Safeguarding Children and Vulnerable Adults Knowledge

- Complete the CPPE Safeguarding children and vulnerable adults e-learning (1 hour).
- Pass the safeguarding e-assessment.

#### Or:

#### **Basic Awareness (Alerter) Training in Safeguarding Adults (level 1)**

Complete the <u>Sunderland Safeguarding Adults Board e-learning</u> (45 minutes).

#### **Basic Awareness (Foundation) Training in Safeguarding Children**

 Complete the Sunderland Safeguarding Childrens Board approved Training www.sunderlandscb.com in Safeguarding Children (1 to 2 hours)

#### And:

 Read and understand the Gillick Competence and are able to assess young people under the age of 16 years for Gillick Competence. Refer to www.cqc.org.uk/content/nigels-surgery-8-gillick-competency-and-fraserguidelines

#### **Box 2: Learning and Assessments – Service Delivery**

#### **Consultation Skills for Pharmacy Practice (3 hours)**

- Complete the CPPE Consultation Skills e-learning or distance learning.
- Pass the consultation skills e-assessment.

### Stop Smoking National Centre for Smoking Cessation and Training (NCSCT) practitioners assessment: knowledge and skills (8 hours)

- The NCSCT provides assessment, certification and training for NHS stop smoking service providers. This NCSCT Training Programme will provide you with a good understanding of the factors involved in smoking and smoking cessation, and will link this theoretical understanding to professional practice. It has been developed for experienced professionals working for NHS Stop Smoking Services who want to update or improve their knowledge and skills as well as newcomers to the profession.
- The NCSCT has recently changed the assessment. There were previously two
  assessments, stages 1 and 2. These two assessments have now merged into
  one knowledge and skills based on line assessment.
- If you have previously completed the stage 1 assessment you will be able to access a shortened version of the new assessment (15 questions).
- For anyone new to the assessment, you will need to register first with the NCSCT and then read the materials before attempting the *Practitioners* assessment – knowledge and skills, which has 25 multiple choice questions. All the assessments are timed and there is a 70 % pass mark. If you don't achieve a pass you will not be able to access the assessment again for three days.

or

 Complete the Sunderland Stop Smoking Service New Adviser Training co-ordinated by the Live Life Well Service www.livelifewell.org.uk/

#### Staying up-to-date

• Attend annual Sunderland Stop Smoking Refresher Training co-ordinated by the Live Life Well Service www.livelifewell.org.uk/

#### **Standard Operating Procedures for Self-Certification**

#### The Provider will:

- 1. Review this DoC self-assessment tool to identify any learning needs and refer to the training requirements for guidance.
- 2. Complete any necessary training.
- 3. Print and sign or electronically sign this Declaration of Competence statement.
- 4. Upload the following documentation to the NEPO portal or send to Public Health Commissioning Room 3.103, Civic Centre, Sunderland, SR2 7DN or email to: PHenquiries@sunderland.gov.uk
  - Signed Declaration of Competence statement;
  - Course certificate(s).

The Council will issue a letter of authorisation to enable provision of the Service on receipt and approval of all of the above documentation.

This DoC is valid for three years. If however it is necessary to vary the delivery of the Service, the Provider may be required to revisit the DoC and resubmit this to the Council. The Provider may choose to attend a course to revise knowledge, skills and behaviours to ensure the DoC criteria are met.

I have the necessary knowledge and skills to provide the NHS Stop Smoking Service and can demonstrate these skills. I acknowledge that it is my responsibility to update my knowledge and skills on an on-going basis and to formally renew my Declaration of Competence for the Service every 3 years.

Signed
(Scanned or typed signature acceptable)
Name
Position
Date

For and on behalf of

Address of Organisation

**Email Address** 

#### **APPENDIX 6C**

### DECLARATION OF COMPETENCE - NHS STOP SMOKING SERVICES IN COMMUNITY PHARMACY - NON-CLINICIANS

Sunderland City Council is using a locally developed Declaration of Competence (DoC) system to review health professionals' competence to deliver locally commissioned services and to gain assurance that they have the appropriate knowledge, skills and behaviours to deliver high-quality, consistent services.

Each Public Health service has a framework that sets out the core professional competencies required for that service. The framework allows self-assessment of competence and outlines the recommended learning to enable self-declaration.

The **training requirements** to meet the competencies in this DoC and enable self-certification to deliver the Public Health commissioned **NHS Stop Smoking Services** in Sunderland are set out below in boxes 1 and 2:

#### **Box 1: Learning and Assessments - Safeguarding**

#### Basic Awareness (Alerter) Training in Safeguarding Adults (level 1)

Complete the <u>Sunderland Safeguarding Adults Board e-learning</u> (45 minutes).

#### **Basic Awareness (Foundation) Training in Safeguarding Children**

 Complete the Sunderland Safeguarding Childrens Board approved Training <u>www.sunderlandscb.com</u> in Safeguarding Children (1 to 2 hours)

#### And:

 Read and understand the Gillick Competence to enable assessment of young people under the age of 16 years for Gillick Competence. Refer to www.cqc.org.uk/content/nigels-surgery-8-gillick-competency-and-fraserguidelines

#### **Box 2: Learning and Assessments – Service Delivery**

Stop Smoking National Centre for Smoking Cessation and Training (NCSCT) practitioners assessment: knowledge and skills (8 hours)

- The NCSCT provides assessment, certification and training for NHS stop smoking service providers. This NCSCT Training Programme will provide you with a good understanding of the factors involved in smoking and smoking cessation, and will link this theoretical understanding to professional practice. It has been developed for experienced professionals working for NHS Stop Smoking Services who want to update or improve their knowledge and skills as well as newcomers to the profession.
- The NCSCT has recently changed the assessment. There were previously two
  assessments, stages 1 and 2. These two assessments have now merged into
  one knowledge and skills based on line assessment.
- If you have previously completed the stage 1 assessment you will be able to access a shortened version of the new assessment (15 questions).
- For anyone new to the assessment, you will need to register first with the NCSCT and then read the materials before attempting the *Practitioners* assessment – knowledge and skills, which has 25 multiple choice questions. All the assessments are timed and there is a 70 % pass mark. If you don't achieve a pass you will not be able to access the assessment again for three days.

or

 Complete the Sunderland Stop Smoking Service New Adviser Training co-ordinated by the Live Life Well Service <a href="www.livelifewell.org.uk/">www.livelifewell.org.uk/</a>

#### Staying up-to-date

 Attend annual Sunderland Stop Smoking Refresher Training co-ordinated by the Live Life Well Service <a href="https://www.livelifewell.org.uk/">www.livelifewell.org.uk/</a>

#### **Standard Operating Procedures for Self-Certification**

#### The Provider will:

- 1. Review this DoC self-assessment tool to identify any learning needs and refer to the training requirements for guidance.
- 2. Complete any necessary training.
- 3. Print and sign or electronically sign this Declaration of Competence statement.
- 4. Upload the following documentation to the NEPO portal or send to Public Health Commissioning, Room 3.103, Civic Centre, Sunderland, SR2 7DN or email to: PHenquiries@sunderland.gov.uk
  - Signed Declaration of Competence statement;
  - Course certificate(s).

The Council will issue a letter of authorisation to enable provision of the Service on receipt and approval of all of the above documentation.

This DoC is valid for three years. If however it is necessary to vary the delivery of the Service, the Provider may be required to revisit the DoC and resubmit this to the Council. The Provider may choose to attend a course to revise knowledge, skills and behaviours to ensure the DoC criteria are met.

I have the necessary knowledge and skills to provide the NHS Stop Smoking Service and can demonstrate these skills. I acknowledge that it is my responsibility to update my knowledge and skills on an on-going basis and to formally renew my Declaration

of Competence for the Service every 3 years.

Signed

(Scanned or typed signature acceptable)

Name

Position

Date

For and on behalf of

Address of Organisation

**Email Address**