Appendix 1: Service description and pathways

This document describes the various elements of support included as part of the community-based Smoking Cessation Service Specification.

Support to Stop (Abrupt quit) Programme

NICE guidance, including Harm Reduction guidance, identifies an abrupt approach to stopping smoking (quitting in one step) as the most effective way to stop smoking. This, therefore, remains the core service offer from Community Providers. There are some recent changes to the guidance following recommendations by the National Centre for Smoking Cessation (NCSCT). The Service and Delivery guidance (2014) and the Standard Treatment Programme, recommend that **weekly one to one support sessions should be offered up to four weeks** after the quit date; to include a combination of behavioural support and licensed pharmacotherapy. All licensed pharmacotherapy is available as first-line treatment and Providers shall not present any specific medication more favourably than another. Evidence shows that combination NRT has been shown to have an advantage over using single NRT.

Guidance recommends a minimum time allocated for each appointment as follows:

- **Session 1:** Pre-quit Assessment (1 or 2 weeks prior to Quit Date) (30 minutes)
- **Session 2:** Quit Date (20 minutes)
- **Session 3:** 1-week post Quit Date (15 minutes)
- **Session 4:** 2-weeks post Quit Date (15 minutes)
- **Session 5:** 3-weeks post Quit Date (15 minutes)
- **Session 6:** 4-weeks post Quit Date (4-week follow-up appointment -15 minutes)
- **Total:** 6-weeks (1 hour 50 minutes)

Follow-on sessions shall be provided as per specification up to an optimum period of 12-weeks with the supply of pharmacotherapy as required. Carbon monoxide (CO) readings shall be taken throughout the support programme and monitoring returns with CO outcomes sent at the 4-6-week quit date and 12-weeks.

If the client relapses during the course of 12 weeks, record the outcome and offer a further abrupt quit attempt, if the Service User is motivated to continue with support. An exception to this is if the client has received varenicline (Champix®), NICE guidance recommends waiting for a period of up to 6 months before a second attempt (unless special circumstances have hampered the person's initial attempt to stop smoking, when it may be reasonable to try again sooner).

Cut Down to Stop (Quit) Programme

This Service is for people who are willing to engage with a Smoking Cessation Service Provider, but who do not feel ready to stop smoking, or perhaps they feel unable to stop in one step. The service offers a structured approach to cutting down on cigarette smoking (harm-reduction) over a period of up to 4-weeks. The service exists not as an end in itself, but seeks to engage people on a journey towards quitting for good. It is hoped therefore that service users may move seamlessly on to the Support to Stop ‘Abrupt Quit’ programme.
Suggested cut down (harm-reduction) approach:

- Week 1 Cut down in smoking by 0-25%
- Week 2 Cut down in smoking by 26-50%
- Week 3 Cut down in smoking by 51-75%
- Week 4 Cut down in smoking by 76-99%

Reassure people who smoke that licensed nicotine-containing products are a safe effective way of reducing the amount they smoke. Help people who are cutting down prior to stopping smoking to set a specific quit date and develop a schedule detailing how much they aim to cut down (and when) in the lead up to that date. After this period and if the client is motivated to quit then encourage them to enter the abrupt quit programme should be made. Failing this, the Provider should make a referral to LiveWell Dorset for assessment and follow up. Suggested products to use with the Cut Down to Quit Programme are the nicotine inhalator or gum with titration of dose and on-going weekly support. NB. All forms of licensed NRT can be considered for a harm-reduction approach.

**Short-Term Abstinence Programme**

This programme is suitable for clients who wish to stop smoking for a short period of time (up to 4-weeks), for example, during a period of admission to hospital. Reassure people who smoke that licensed nicotine-containing products are a safe effective way of reducing the amount they smoke. The client should be assessed as appropriate for the Short-Term Abstinence Programme and given a supply of nicotine replacement therapy to cover the abstinence period. Arrange a follow on appointment and provide encouragement to enter into the Abrupt Quit Programme (as appropriate) or refer to LiveWell Dorset. An explanation should be given at the start of the programme, of the health benefits to quitting, how to manage nicotine withdrawal during the period of abstinence, combined with behaviour change coping strategies to prevent relapse. Where possible take carbon monoxide readings during the abstinence period to encourage further engagement and motivation to quit totally.

**Note on the use of nicotine vapourisers (electronic cigarettes)**

PHE, MHRA and NICE tobacco harm reduction guidance makes it clear that the use of nicotine vapourisers is considerably less hazardous than tobacco smoking. Commissioning arrangements should include offering behavioural support to clients who wish to use unlicensed, self-purchased products, whether this is in combination with or instead of a licensed product. A new Tobacco Products Directive regarding nicotine vapourisers to be licensed as a medicine will come in to effect from 2016.

Inform people that some nicotine-containing products are not regulated by the MHRA and therefore, their effectiveness, safety and quality cannot be assured. Also advise them that these products are likely to be less harmful than cigarettes.

If people no longer smoke cigarettes, but would like support with coming off nicotine-containing products (including e-cigarettes), they should be referred to LiveWell Dorset to access advice and support.
Pathway for Stop Smoking Support: Abrupt quit (quitting in one step)

If enhanced support is identified for clients in a high risk category e.g. mental health issues then a referral to LiveWell Dorset should be offered, if declined, give information re contacting LWD for future support. LWD is available for continued support at any stage of the stop smoking programme and at any time the client feels they would like to make direct contact.
Cut Down to Quit Programme (4 weeks)

**First contact**
(Pre-quit Assessment)

- Assess current readiness and ability to cut down *
- Inform client about the treatment programme
- Assess current smoking status/past smoking history – help them to set goals and discuss reduction strategies
- Explain how tobacco dependence develops and assess nicotine dependence
- Discuss stop smoking medications
- Conduct carbon monoxide (CO) monitoring
- Discuss coping strategies during difficult situations
- Address any high risk situations in the coming weeks
- Provide a summary
- Gain consent to share relevant information with third party
- Provide summary

* Give contact information of LWD and/or make referral on client’s behalf if further support is requested at any stage throughout the programme

**Second contact**

- Confirm readiness and ability to cut down
- Ensure sufficient supply of NRT medication (inhalator/gum, correct usage and expectations
- Discuss withdrawal symptoms/cravings/ urges to smoke
- Look at coping strategies especially when dealing with client’s smoking contacts
- Conduct CO monitoring
- Confirm the importance of the agreed cut down approach
- Prompt a commitment from the client re motivation to cut down
- Explore potential quit date
- Discuss plans and provide a summary

* Give contact information of LWD and/or make referral on client’s behalf

**Contact 3, 4, & 5**
(Weekly support)

- Check client’s progress and amount of cut down
- Take CO reading
- Enquire re medication use, side effects and ensure client has sufficient supply
- Discuss withdrawal symptoms/cravings – how did they manage these?
- Discuss coping strategies during difficult situations
- Address any high risk situations in the coming week
- Confirm the importance of continuing to cut down as agreed
- Prompt a commitment from the client
- Explore potential quit date
- Provide a summary

* Give contact information of LWD and/or make referral on client’s behalf

**Contact 6**
(End of 4 weeks Cut Down to Quit Programme)

- Has the client now quit?
- Check on client’s progress and options (if relapsed consider referral to LWD)
- Measure CO reading
- Advise about continued use of medication check any side effects
- Discuss cravings/urge to smoke and coping strategies for the future
- Confirm the importance of not smoking
- Obtain agreement from client to enter the Abrupt Quit programme and follow as per pathway (tailor to client need)
- Return 4-week monitoring outcome
- If client has relapsed and declines further support – offer referral to LWD
- Provide a summary

* Give contact information of LWD and/or make referral on client’s behalf

If enhanced support is identified for clients in a high risk category e.g. mental health issues then a referral to LiveWell Dorset should be offered, if declined, give information re contacting LWD for future support. LWD is available for continued support at any stage of the stop smoking programme and at any time the client feels they would like to make direct contact.
Short-term Abstinence Programme (up to 4-weeks)

**First contact**
(Pre-abstinence Assessment)
- Assess current readiness and ability to abstain *(up to 4-weeks)*
- Inform client about the treatment programme
- Discuss why it is important to reduce the harm caused by smoking to others as well as themselves
- Assess current smoking status/past smoking history
- Explain how tobacco dependence develops and assess nicotine dependence
- Discuss stop smoking medication
- Conduct carbon monoxide (CO) monitoring
- Discuss coping strategies during difficult situations
- Address any high risk situations in the coming weeks
- Confirm the importance of the ‘not a puff’ rule and prompt a commitment from the client
- Stress importance of using sufficient NRT
- Prompt client commitment to the programme
- Gain consent to share relevant information with third party
- Provide summary

* Give contact information of LWD and/or make referral on client’s behalf, if further support is requested at any stage throughout the programme

**Second contact**
- Confirm readiness and ability to abstain
- Discuss the health benefits of abstaining and how to manage nicotine withdrawal during the period of abstinence
- Combined behaviour change coping strategies to prevent relapse
- Ensure sufficient supply of NRT medication and expectations
- Conduct CO monitoring
- Confirm the importance of the agreed abstinence approach
- Prompt a commitment from the client to maintain abstinence
- Discuss plans and provide a summary

* Give contact information of LWD and/or make referral on client’s behalf

**Follow-up sessions**
- Confirm that client has remained abstinent
- Address any relapse and discuss further coping strategies
- Repeat the harm reduction message of the health benefits of abstaining and how to manage nicotine withdrawal during the period of abstinence
- Ensure sufficient supply of NRT medication and expectations
- Conduct CO monitoring
- Return 4-week monitoring outcome
- Prompt a commitment from the client to maintain abstinence
- Encourage client to enter the Abrupt Quit Programme at any stage
- If client has relapsed and declines further support – offer referral to LWD
- Discuss plans and provide a summary

* Give contact information of LWD and/or make referral on client’s behalf

If enhanced support is identified for clients in a high risk category e.g. mental health issues then a referral to LiveWell Dorset should be offered, if declined, give information re contacting LWD for future support. LWD is available for continued support at any stage of the stop smoking programme and at any time the client feels they would like to make direct contact.
The final two diagrams show the relationship between community-based smoking cessation providers and LiveWell Dorset (referred to here as the ‘Health Improvement Hub’ or just the Hub).

### Descriptor of services within the tobacco pathway

<table>
<thead>
<tr>
<th><strong>Brief Intervention / Risk Perception</strong></th>
<th><strong>Enhanced Support</strong></th>
<th><strong>E-cig to nicotine free</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Who?</strong> Those not yet ready to quit</td>
<td><strong>Who?</strong> Those highly addicted (must have tried and failed the standard 12-week quit at least once) or those with a mental health problem.</td>
<td><strong>Who?</strong> Those wanting to overcome long-term addiction to e-cigarettes or NRT.</td>
</tr>
<tr>
<td><strong>What?</strong> 20 minute intervention over the phone.</td>
<td><strong>What?</strong> Coaching intervention over the phone or on a face-to-face basis. Planned follow-up calls fortnightly during the course of 12 weeks.</td>
<td><strong>What?</strong> Coaching intervention over the phone. Planned follow-up calls and support given in line with agreed individual plan.</td>
</tr>
<tr>
<td><strong>How?</strong> Utilises interactive web-based resource and COM-B questionnaire. Determines next step in support pathway.</td>
<td><strong>How?</strong> Runs in conjunction with 12-week standard quit and cut down to stop interventions in the community. Coach utilises full set of COM-B diagnostic/support tools.</td>
<td><strong>How?</strong> Utilises COM-B questionnaire. May require liaison with a community provider if NRT is required as part of the individual plan.</td>
</tr>
</tbody>
</table>

### Support to quit

| **Who?** Those wanting support in making an attempt to quit smoking. | **Who?** Those not quite ready to quit but wanting to cut down on the number of cigarettes they smoke. | **Who?** Those not yet ready to quit but who want to abstain for a period of time. |
| **What?** Initial consultation together with choice from full range of pharmacotherapy followed by 12-week programme of support to quit. | **What?** Initial consultation together with supply of NRT (puff or inhalator) to support a 4-step programme – reduction of dose and ongoing support. | **What?** Initial consultation together with choice from full range of NRT followed by agreed programme of support to abstain. |
| **How?** Established programme delivered by trained advisor (tier-2) | **How?** Support offered by trained advisor (tier-2) over agreed period (up to 4 weeks) alongside regular supply of NRT with view to supporting the individual to make a subsequent quit attempt. | **How?** Individually agreed programme delivered by trained (tier-2) advisor. Seek to engage individual in making a subsequent quit attempt. |

### Cut down to stop

### Short-term abstinence

Note
This diagram summarizes the range of services that support smokers to quit or to reduce their consumption of tobacco/nicotine containing products. Clearly, the ultimate goal is for people to quit smoking completely and overcome their dependence on nicotine. By commissioning a range of service options, PH Dorset is keen to offer support to smokers, even if they do not feel ready to make a life-long quit attempt. We aim to positively engage people that smoke regardless of where they are on their journey towards becoming smoke-free.

(Based on NICE Guidance, PH 10 and PM45)
Figure 2: Smoke-stop support pathway

- **Referral**
  - Referral to Hub
  - Self-referral to Hub

- **Assessment**
  - Assessment identifies smoker and intention

- **Support**
  - Refuses support
  - Brief intervention
  - Enhance support
  - Support to quit
  - Relapse

- **Monitor**
  - Follow-up at 3, 6 and 12 months
  - Exit

Legend:
- HUB responsibility/lead