

Smoking Cessation Transfer of Care

Stakeholder Brief

Pharmacy Integration Team

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NHS England and NHS Improvement

Background

- NHS LTP commits to improvements in preventative healthcare, including smoking.
- Smoking-related illnesses put a considerable strain on the NHS. Data from 2015/16:
 - 474,000 hospital admissions
 - 79,000 deaths (Department of Health and Social Care, 2017)
- Smoking cessation programmes already exist in community settings but are variable in their involvement of pharmacy. Hospitals are adopting the Ottawa Model of Smoking Cessation (OMSC), which:
 - Will be adopted throughout England (NHS Long Term Plan, 2019) – led by the NHSE/I Prevention team
 - Is a 12-week programme
 - Requires follow-up smoking cessation treatment after discharge from hospital
 - Increased 1-year quit rates by 11% (Mullen, 2010)
 - Is expected to save the NHS £85m within 1 year (Royal College of Physicians, 2018)
- The aim of this service is to support delivery of the prevention ambitions in the NHS LTP, and for community pharmacy to become a nationally available choice for patients to access smoking cessation support post discharge.
- [Gov.uk CPCYear3 announcement](#)
[Smoking Cessation Transfer of Care Pilot](#)

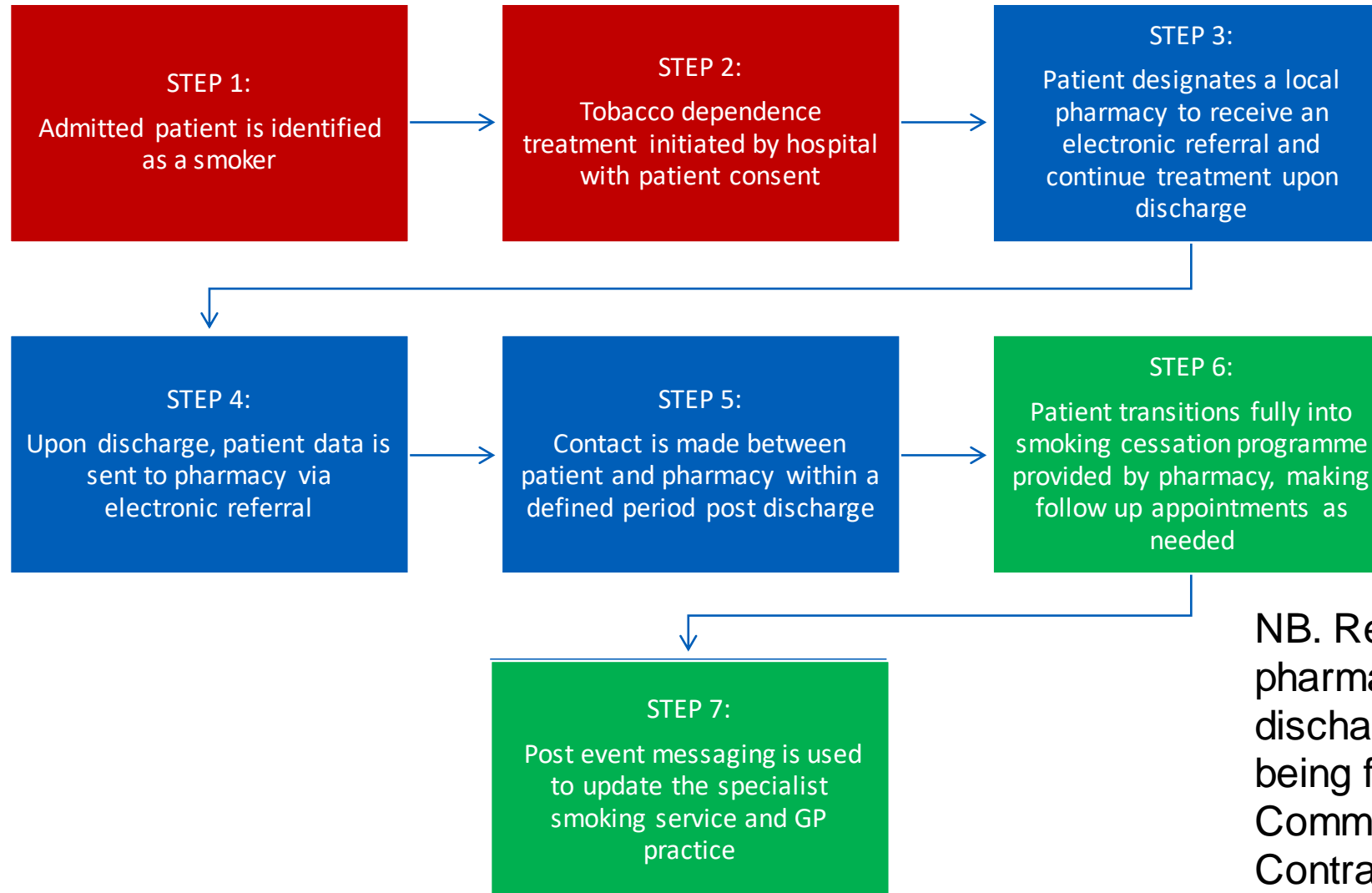
Smoking Cessation Advanced Service (SCAS)

- Following a pilot service introduced in 2020/21, a new advanced service is being commissioned to enable community pharmacies to deliver the 12 week follow up at discharge for patients after initiating a smoking cessation quit plan whilst in hospital
- The service enables the patient to complete their smoking cessation attempt at their chosen community pharmacy, who will provide behavioural support and supply of NRT
- This service will be delivered by the pharmacist only
- A service specification for the pharmacies and additional resources for hospital smoking and hospital pharmacy teams and community pharmacy teams are being developed
- The expected start date is January 2022. NHS Trusts and ICSs will determine their own start dates for implementation
- Pharmacies can register as the commissioner via NHS Business Service Authority portal once the service spec is available.
- Implementation by NHS trusts will inform the local preparation and connection with community pharmacies
- Trusts will determine the digital referral system with a defined data set as part of the referral
- As in the pilots, GP practices will be notified of the smoking status of their patients through a Post Event Message (PEM)

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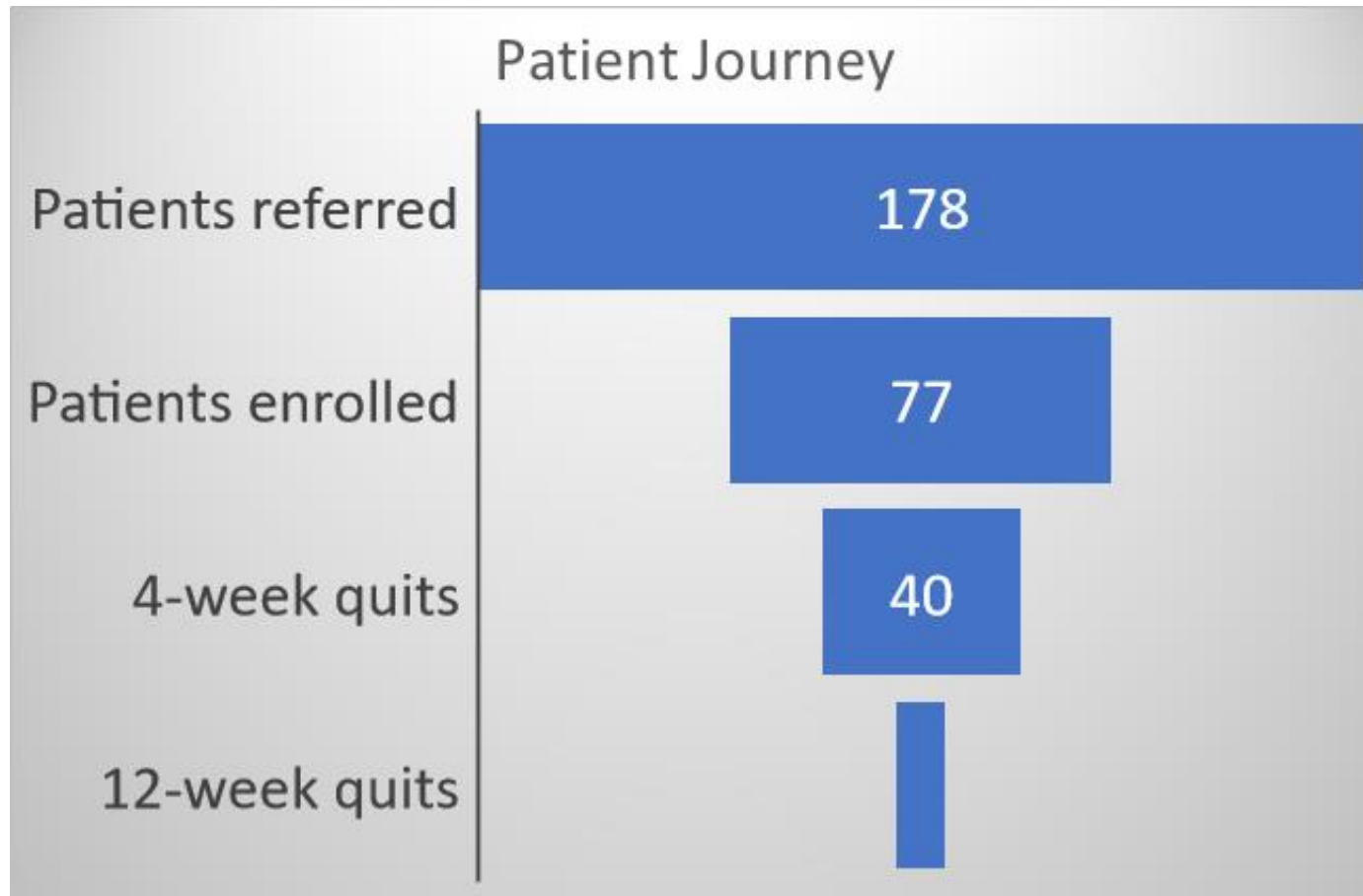


Model of Care



NB. Referral into this pharmacy service post discharge results in fees being funded through the Community Pharmacy Contractual Framework (CPCF) not by Local Authorities

Data Overview: Dec 2020 to October 2021



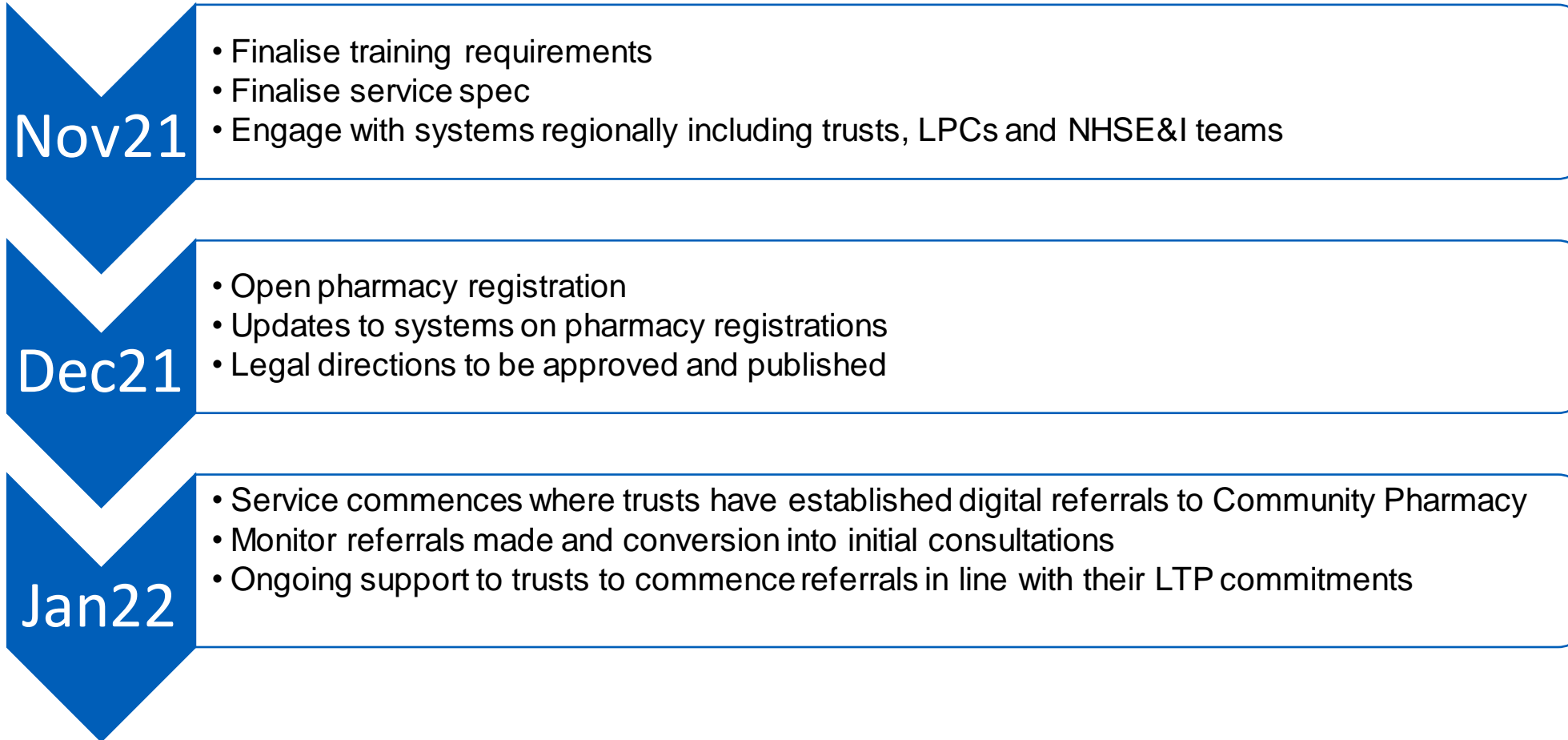
70% of Oldham residents accepted a referral to a pharmacy local to them

43% conversion rate of referrals into registered patients

The % reflects those patients who changed their mind or were uncontactable post discharge and mirrors local rates

49% quit rate for 4 week quitters broadly in line with expectations for what is a new pathway under covid pandemic conditions

High Level Timeline for national service



Community Pharmacy and Hospital Pharmacy and Hospital Smoking Teams Working Together



- Understanding of the roles of Community Pharmacy, Hospital Smoking Teams, Hospital Pharmacy Teams and the link to the community based stop smoking services are really important
- Although pharmacies will be able to register for the service once registration opens, delivery of the service will be dependent on the trust timetable to commence referrals as per the NHS LTP
- An updated list of pharmacies that are offering the service will be made available to hospital pharmacy teams
- A consistent data set including details of NRT will need to be transferred by the hospital smoking teams to the community pharmacy providing the smoking service. This data set is independent of any specific IT system.
- The costs of NRT have been included as part of the LTP tobacco dependency financial commitments to each ICS. An element of this funding is intended to cover NRT costs once patients leave hospital and will need to be made available to this service. NRT costs for this service will be therefore re-charged to each ICS (or lead CCG)
- From April 2022, hospital trusts will be provided with funding to recruit 0.2 FTE band 7 to support with implementation of this service alongside other community pharmacy services that integrating with hospitals e.g. Discharge Medicines Service
- At discharge the full medicines information detail for the patient including NRT supplied will also flow from the hospital pharmacy team to the community pharmacy team as part of the Discharge Medicines Service. This may be a different to the pharmacy receiving the smoking transfer of care referral as not all pharmacies are likely to register for the national SCAS service.

Working Together with Locally Commissioned Community Based Services

- The pilot work is specifically seen as testing a model that creates additional capacity in primary care and not a replacement for any local authority commissioned service where initiation may be started in a community pharmacy or elsewhere in primary care.
- This is a complimentary service to existing locally commissioned services
- The service will be both behavioural support **and** supply of NRT
- The service will add capacity for the people going through this pathway.
- We anticipate that as in the pilots there will be collaboration and co-operation between the pharmacies and the locally commissioned service to support those individuals to successfully quit smoking.
- We anticipate that pharmacies will look to provide this pathway in addition to a locally commissioned service and maximise the use of their stop smoking practitioners.

Supporting the Patient

- Individuals will have the choice of being referred to a pharmacy offering the service. The tobacco dependency teams in the hospitals trusts will use their judgement/locally agreed protocols to determine if referral to a Stop Smoking Service would be more suitable.
- Notification to GP Practices and the hospital trust based Tobacco Dependency Service happens at key points of the patient journey e.g. 4 week quit, exiting the service
- Carbon Monoxide monitoring is part of the service
- Additional information will be provided to support their quit journey. E.g. leaflets , videos, other digital resources

Testimonials

- Mr Smith, a retired male aged 69, was referred to Lees Road Pharmacy in Oldham for stop smoking support after quitting smoking whilst in hospital. Mr Smith was discharged from hospital on 23rd December 2020.
- *'I feel like my health has improved...feel fitter and better. I am so happy that you have done this for me [and am] very appreciative'*
- Nadia, Lees Road Smoking Cessation Practitioner, reflected on Mr Smith's experience in this Smoking Cessation Transfer of Care (SCTC) pilot:
- *'Mr Smith was a little resistant to begin with, but as we got to know each other and started to have some good conversations it really felt like I was making a difference to his life. He was really pleased with himself for quitting smoking successfully, it was great to see. We had built up such a good relationship, he even said he would invite me to his 70th birthday party in the summer, once the lockdown restrictions end!*
- *I hope that we can continue to support patients who are referred to us after quitting smoking in hospital as the benefits to the patient are tremendous and it is a great opportunity for community pharmacy to work with the hospital to support patients in this way.'*

Testimonials

- Mr Mahrrof, a retired male aged over 60, was referred to Lees Road Pharmacy in Oldham for stop smoking support. Mr Mahrrof was referred by the hospital team on 1st March 2021 after being advised to quit smoking by the cardiology team as he needed an operation.
- Mr Mahrrof had weekly telephone consultations with Nadia, with a successful 4-week quit recorded on 14th April and a successful 12-week quit recorded on 3rd June. He used NRT patches, with the Quickmist spray to cover any cravings throughout the day. Although he found the Quickmist unpleasant, he persevered with using it as he found it very effective.
- *‘All the people who supported me were wonderful, everyone was very helpful and supportive all the way along. Nadia built both my confidence and my purpose, she made me believe that I could stop smoking and made me see that if I did quit smoking it would prolong my life and give me more time with my grandchildren – they are the whole world for me.’*
- *‘If I can give up smoking, anyone can give up if they have the right people and the right support.’*