

**Smokefree Hampshire**

Grove House  
Lutyens Close  
Chineham Court  
RG24 8AG

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**SERVICE LEVEL AGREEMENT**

For the provision of  
Smoking Cessation Treatment Programme within  
Community Pharmacies

**(Level 2 Intensive support service model)**

**From 1<sup>st</sup> April 2024 to 31<sup>st</sup> March 2025**

**1. This agreement is between**

**The Commissioner:**  
Smokefree Hampshire

Solutions 4 Health, delivering as

Address:

Grove House  
Lutyens Close,  
Chineham Court  
RG24 8AG

**And the Provider:**  
(Referred to in this document as the Pharmacy)

Address:

Pharmacy F code:

## 2. Definitions

**The Client** as referred to in this document is the recipient of the smoking cessation treatment programme as detailed in this document.

**Smokefree Hampshire** is the name of the stop smoking service responsible for managing this contract.

## 3. Period

3.1. This agreement is valid for the 1<sup>st</sup> April 2024 to 31<sup>st</sup> March 2025. It may be subject to renewal following review, but renewal cannot be guaranteed.

## 4. Obligations

4.1. The Pharmacy will provide the service in accordance with the specification (schedule 1).

4.2. Smokefree Hampshire will manage the service in accordance with the specification (schedule 1).

4.3. This Service Level Agreement comprises a Service Level Specification and General Service Terms and Conditions in respect of the provision of Stop Smoking Services, and where *'the provider'* shall comply with the requirements of both in full in order to receive payment.

4.4. The Service Level Specification details Smokefree Hampshire's requirements in the primary care (Community Pharmacy) setting.

4.5. The General Service Terms and Conditions details the arrangements that underpin the Service Level Specification.

4.6. There is no requirement for contractors to have a Standard Operating Procedure (SOP) in place for providing this service however, adherence to the SLA in full is accepted by all parties in signing this agreement.

## 5. Service Aim

- 5.1. In line with national guidelines, Smokefree Hampshire aims to help and encourage local health services deliver the most effective and most cost-effective services to encourage people who smoke to quit; ensuring that all clients are able to make a fully informed choice of where and how they receive support to quit.
- 5.2. All Pharmacies are expected to provide essential and those additional services they are contracted to provide to all their clients. This service specification outlines the more specialised services to be provided. The specification of this service is designed to cover the enhanced aspects of clinical care of the client, some of which are beyond the scope of essential services. No part of the specification by commission, omission or implication defines or redefines essential or additional services.

## 6. Payments

The Payment by Results (PbR) framework is strongly endorsed by the DH in order to improve quality and efficiency of smoking cessation services and to promote innovation. The PbR framework has already been successfully implemented for smoking cessation services in other Trusts and is therefore implemented in this SLA.

Smokefree Hampshire will pay the following:

- a payment tariff of £25 in VAT for each client setting a quit date according to Russell standards and attending at least 2 sessions before the four-week quit period.
  - Either**
    - a PBR payment tariff of £50 including VAT for a client following setting a quit date, quits successfully as a CO validated DH valid 4 week quit according to Russell standards.
  - OR**
    - a PBR payment tariff of £25 including VAT for a client following setting a quit date, quits successfully as a self-report 4 week quit according to Russell standards.

An additional payment of:

- £30 (including VAT) for a 12 week follow up quit (regardless of if 4 week quit is CO valid or not)
- Smokefree Hampshire will also reimburse the cost of NRT (combination only to be supplied if Fagerström score is 8 or above, please see Appendix 2) at drug tariff price plus 5% VAT, for up to 8 weeks supply of product(s) per client.

## **7 Administration and data**

- 7.1. Smokefree Hampshire has provided a framework for the recording of relevant service information through PharmOutcomes
- 7.2. Support and training for PharmOutcomes can be provided by contacting Smokefree Hampshire.
- 7.3. The Pharmacy should enter client data on PharmOutcomes in real time. If there are any reasons for delay, data should be entered within 24 hours of any engagement with the client. Any further delay must be communicated to Smokefree Hampshire immediately at [Smokefree.hampshire@nhs.net](mailto:Smokefree.hampshire@nhs.net)
- 7.4. Incomplete, or inaccurate data will not trigger payments until quality issues have been resolved by the pharmacy.
- 7.5. Invoices should be submitted to Smokefree Hampshire via PharmOutcomes
- 7.6. Payments will be made monthly in arrears within 50 days for auditing and validating quits from receipt of a valid and undisputed invoice
- 7.7. Delay in submitting data and invoices may result in delays in payment and may result in non-payment of invoices. Delays over 3 months and or those missing the end of quarter or year deadlines will not be paid unless there are highly exceptional circumstances. No payment will be withheld without prior discussion with the Pharmacy concerned.
- 7.8. The service commissioned by Smokefree Hampshire is based on the service delivering their commissioners annual 4-week quitter target and 12 week follow up. Activity will be monitored monthly and quarterly and where activity across all providers in the care pathway is forecast to exceed the levels required by Smokefree Hampshire they will work with subcontractors to effect remedial action such that the planned activity delivered but does not greatly exceed the full target by the end of the year. This does not require Smokefree Hampshire to give each subcontractor its own target but does enable Smokefree Hampshire the opportunity to address over as well as under performance and help reduce financial risk. It may include temporary suspension of service within the Pharmacy and referral of all smokers to Smokefree Hampshire.

## 8. Standards

8.1. The service will be provided in accordance with the standards detailed in the specification (schedule 1)

## 9. Key Performance measures and remedies

The payment enhancement reflects important service requirements for the quality and ongoing development of Smokefree Hampshire's Stop Smoking Service.

**4-week Success rates should be between 50% and 75% but with the aim being to exceed 50%.** Where success rates are under 40% in one quarter Smokefree Hampshire and the Pharmacy Manager will hold a Service Review meeting to investigate and the Pharmacy will be supported to improve by at least 5% by the end of the following quarter and will subsequently achieve at least a 50% success rate within four months of review. Failure to raise success rates after reasonable intervention will result in termination of the contract unless exceptional circumstances exist.

Attempts to contact clients to establish 4 and 12 week quit status must be recorded on the database to evidence work done. (face-to-face, phone, text and emails all acceptable methods)

**CO validation rates should be at least 70%.** This is the number of clients who have their success at 4 weeks validated by a carbon monoxide reading (CO reading of less than 10ppm).

**Twelve weeks post quit date follow up must be recorded and the episode completed between 12- and 14-weeks post client's quit date.**

Attempt to contact 100% of 4 week quits and confirm client's quit status by text, telephone, email or in person. Congratulate client on remaining quit, discuss any concerns and invite back if client has relapsed.

If relapsed client, has a serious mental illness of two or more long term conditions, they should be referred to Smokefree Hampshire, the specialist service.

Record status (Quit, fail or lost)

**NOTE:** Smokefree Hampshire will attempt to contact any client that the provider has not contacted by 14 weeks post Quit Date. If the client is quit, Smokefree Hampshire will **only** pay the provider for the 12-week quit **IF** there is sufficient evidence of them attempting to contact the client or evidence of an exception circumstance preventing this happening.

### Service evaluation

All clients entering the service are to be offered a client service evaluation form as supplied by Smokefree Hampshire. Smokefree Hampshire advisers will contact clients who have used the pharmacy service in order to audit service quality.

**Data Quality** all questions should be fully answered including medication prescribed should all be recorded.

<b>PERFORMANCE MEASURE</b>	<b>CONTEXT</b>
4 Week success rate is over 50%	Account will be taken of numbers of clients seen and the Practice demographics.
All data is valid and meets service specifications this includes all medication prescribed to be recorded	Specific data is required by the Department of Health and is detailed in the appendices.
All data is submitted on time	Data is submitted as described in the contract
Client evaluation forms returned on at least <b>30%</b> of clients who set a quit date within a year.	Client service evaluation questionnaires as provided by Smokefree Hampshire to be provided for all clients and forwarded to Smokefree Hampshire for review and collation.
CO validation rate. The pharmacy should aim for a minimum of 70% of those who stop smoking being DH CO validated (reading of less than 10 ppm) and this being reported to Smokefree Hampshire	CO Validation reduced from 85% to 70%
12-week status is confirmed between the 12 and 14-week post quit date. Confirm if client is still quit and smokefree. This can be carried out by texting, email, phone call or face to face with client.	20% of patients should reach a 12 week status. Attempt to contact 100% of 4 week quits and status recorded (Quit, Fail or Lost)

## 10. Unsatisfactory performance

- 10.1. Pharmacies who repeatedly fail to meet these performance measures in any one quarter will be reviewed by Smokefree Hampshire staff to identify the problems and agree a corrective course of action and timetable. Services that continue to provide substandard service within four months of a service review will no longer be commissioned by Smokefree Hampshire stop smoking service, unless exceptional circumstance have occurred.
- 10.2. Unsatisfactory performance as identified through service audit, user assessment of the service, complaints or other means will be referred to Smokefree Hampshire for investigation and may result in the suspension and/or termination of the service by the Smokefree Hampshire.
- 10.3. Failure to provide a directed service to the specification will be considered a breach of SLA contract.

## **11. Service promotion and support**

- 11.1 Smokefree Hampshire will be responsible for the promotion of the service locally, including the development of publicity materials, which pharmacies can use to promote the service to their clients.
- 11.2 Smokefree Hampshire will provide details of relevant referral points which pharmacy staff can use to signpost service users who require further assistance.
- 11.3 Smokefree Hampshire will provide support for Pharmacy staff as and when required.
- 11.4 Pharmacies will nominate a Lead for smoking cessation. This person will be the link between the pharmacy and Smokefree Hampshire on all issues of smoking cessation, responsible for supporting the development of the service within the pharmacy and ensuring effective communication between all parties and within the Pharmacy. This person does not have to be the pharmacy stop smoking adviser. This person will arrange at least quarterly contact with a Smokefree Hampshire adviser to support ongoing performance improvement.
- 11.5 Smokefree Hampshire will provide quarterly feedback on service performance against the outcome measures.
- 11.6 Pharmacies are responsible for ensuring that there are posters, leaflets and other promotional materials available during national campaigns.

## **12. Clinical Governance and training**

- 12.1 Smokefree Hampshire will provide all training specifically related to this intensive smoking cessation treatment programme apart from the online training provided by National Centre for Smoking Cessation and Training (NCSCT)
- 12.2 All Pharmacy personnel providing the stop smoking services as described within this contract shall have:
  - Attended appropriate Smoking Cessation Level 2 training course
  - Successfully completed the online NCSCT Stop Smoking Practitioner training and provide evidence of this.

Failure to comply with this requirement will result in the suspension of the SLA contract.

- 12.3 New advisers will be required to undertake appropriate Level 2 adviser training with Smokefree Hampshire provided free of charge.
- 12.4 New advisers are required to complete and pass the (NCSCT) Stop Smoking Practitioner online training which can be accessed at <http://www.ncsct.co.uk/> prior to providing the treatment programme without supervision as described in this contract.
- 12.5 A period of 'Learning in Action' by the Pharmacy adviser is optional prior to providing the smoking cessation treatment programme. This could entail the Pharmacy adviser attending Smokefree Hampshire specialist sessions to shadow the Smokefree Hampshire adviser and observe the smoking cessation programme in action. Alternatively, the practitioner can shadow a colleague in their area of work and / or provide written evidence approved by Smokefree Hampshire of health behaviour change skills and experience gained elsewhere, for example working as a Level 2 smoking cessation adviser, weight management or emergency contraception adviser within the past 12 months.
- 12.6 Advisers should ideally see a minimum of 4 clients per month who set a quit date, unless local agreement has been made with Smokefree Hampshire. Failure to achieve this will negatively affect staff skill levels and may result in termination of contract.
- 12.7 Clients with SMI (Serious Mental Illness) must be **offered** a referral to the Smokefree Hampshire specialist service. The SLA provider must enable them to make an informed choice. The pharmacy must be trained to support these clients if they accept them into their service. (See 12.10)
- 12.8 All advisers are expected to complete the NCSCT mental health module within two months of service provision.
- 12.9 Further local pharmacy updates and meetings will be offered periodically to all smoking cessation staff by Smokefree Hampshire as part of field visits to the advisor. Participation at these meetings is encouraged under normal circumstances at least every 6 months to ensure all staff are up to date in service developments.
- 12.10 Training will be available periodically locally. This is provided by Smokefree Hampshire and will be communicated as opportunities arise.

Pharmacy staff should contact Smokefree Hampshire Training Administrator by calling 01264 563039 / 0800 772 3649 or refer to the website [www.smokefreehampshire.co.uk](http://www.smokefreehampshire.co.uk) for the latest information and dates on the Smokefree Hampshire Smoking Cessation Training Schedule.

### **13. Quality Assurance and Access to Services**

A comprehensive range of stop smoking services should be available locally to accommodate all client's needs, and any client preferring specialist support are to be referred to Smokefree Hampshire.



## **14. Confidentiality**

14.1 Both parties shall adhere to the requirements of the Data Protection Act 2018 and the Freedom of Information Act 2000.

14.2 Any approaches by the media for comments or interviews must be referred to Smokefree Hampshire.

## **15. Indemnity**

15.1 The Pharmacy shall maintain adequate insurance for public liability and personal indemnity against any claims which may arise out of the terms and conditions of this agreement.

## **16. Review**

This Service Level Agreement will be reviewed on an annual basis.

The designated Review Officers are:

**For SMOKEFREE HAMPSHIRE:** Name:

Position: GP & Pharmacy Manager, Smokefree Hampshire

**For the Pharmacy:** Name:

Position:

## **17. Complaints Procedure**

17.1 Any complaint made by a client in association with the services covered by this agreement will be dealt with in accordance with Smokefree Hampshire's Complaints Procedure and notified immediately to the designated Practice representative/ Smokefree Hampshire signatories shown above for their attention. Complaints will be discussed with the commissioner (as required) in the contract review meetings.

## **18. Audit Arrangements**

18.1 Quality and financial audit arrangements will take various forms including, sampling and client follow-up, 'spot checks', consumer feedback, surveys and review meetings. Details and results from this work form part of annual review and action planning for improvement.

## **19. Conciliation and Dispute Resolution**

19.1 Disputes between the Provider and Commissioner should be resolved at the lowest possible level and referred to the nominated party detailed in this agreement.

19.2 If the matters cannot be resolved by the parties directly involved then the matter should be referred to the responsible director for each party.

19.3 Disputes should be determined as quickly as possible. In normal circumstances, both parties are committed to resolution within one month of the formal notification of a dispute to the officers as above.

## **20. Termination**

20.1 Smokefree Hampshire reserves the right to amend or withdraw this service.

20.2 This agreement may be amended by Smokefree Hampshire within the 12-month period provided three months written notice is given to the provider.

20.3 Smokefree Hampshire may suspend or terminate this agreement forthwith if there are reasonable grounds for concern including, but not limited to, malpractice, negligence or fraud on the part of the Pharmacy.

20.4 This agreement can be terminated by either party (Smokefree Hampshire or the Pharmacy) at any time during the 12-month period, provided written notice from either party is provided of the reason for termination 3 months prior to the termination date or less than 3 months by mutual agreement of both parties.

## **21. Force Majeur**

21.1 Neither the Client nor the Provider will be liable for delay in performing obligations or for failing to perform obligations if the delay or failure results from circumstances beyond their reasonable control including Force Majeure, Act of God, governmental actions, explosions, civil commotion or industrial dispute.

21.2 The Provider shall use its reasonable endeavours to prevent or overcome any such events and develop contingency and business continuity plans so as to reduce the impact of such events on the performance of this Agreement. The contingency and business continuity plans should be reviewed annually. The primary provider undertakes to use its best endeavours to re-establish any services interrupted by any Force Majeure item as soon as reasonably practicable.

21.3 Other circumstances where Smokefree Hampshire may agree to consider providing further resources, and/or offer other risk sharing agreements to be put in place for this activity, include:

Where Smokefree Hampshire organisational circumstances produce such practical difficulties or a major illness outbreak among staff, leads to an enforced closure of facilities and reductions in operational performance jeopardise either SF delivery plans or targets.

Where the Pharmacy organisational circumstances, such as staff sickness or high client demand, lead to an enforced closure of service or reduction in service the Pharmacy should contact Smokefree Hampshire to negotiate an interim solution.

**Signature**

This document constitutes the agreement between the provider and Smokefree Hampshire in regard to the Service Level Agreement (SLA) for Smoking Cessation.

The provider is required to sign and to agree to the terms as set out in this SLA for the delivery of smoking cessation services for the period April 1<sup>st</sup> 2024 to March 31<sup>st</sup> 2025.

**Signed for and on behalf of the Pharmacy**

Pharmacy Name:

Signature

Printed name

Designation / Position ..... Date .....

Adviser name	Smokefree Hampshire Date trained / NCSCCT Training/ Update training / Mental health module

CO Monitor	Make	Serial number

**Signed for and on behalf of Smokefree Hampshire**

Signature

Printed name

Designation

Date .....

**Please return** to GP & Pharmacy Manager, Smokefree Hampshire at [s4h.enhancedservices@nhs.net](mailto:s4h.enhancedservices@nhs.net).

## APPENDIX 1

### SERVICE SCHEDULE

#### **Background.**

Smoking is the single greatest cause of preventable illness and premature death in the U.K. A person who smokes cigarettes regularly, more than doubles their risk of dying before the age of 65. More than any other identifiable factor, smoking contributes to the gap in life expectancy between the most deprived and the most affluent. To stop smoking is one of the most cost effective of all medical interventions.

Healthy Lives, Healthy People: A Tobacco Control Plan for England clearly defines the Government's continued commitment to reducing smoking prevalence. In Hampshire, this is one of the key targets to improve health, reduce health inequalities and reduce health care spending. As well as reducing prevalence among adults and young people, services need to meet the needs of high prevalence smoking groups such as routine and manual workers and pregnant women.

**NICE guidance recommends that healthcare professionals should take the opportunity to advise all clients who smoke to quit. Those who want to stop should be offered referral to intensive support (for example, a trained GP/ or pharmacy nurse, or pharmacist/pharmacy adviser or a local NHS Smoking Cessation Adviser). Those who are trained NHS stop smoking advisers may 'refer' to themselves. If the 'smoker' wishes to quit but does not wish to, or is unable to accept referral to intensive support, they should still be offered pharmacotherapy in line with NICE technology appraisal guidance No. 39<sup>1</sup> and provided with details of the local and national support available.**

#### **Contact details for Smokefree Hampshire (SMOKEFREE HAMPSHIRE):**

**Main Office:** Grove House, Lutyens Close, Chineham Court, RG24 8AG

**Email:** [smokefree.hampshire@nhs.net](mailto:smokefree.hampshire@nhs.net)

**Tel:** 01264 563039 / 0800 772 3649

[www.smokefreehampshire.co.uk](http://www.smokefreehampshire.co.uk)

## 1. Service outline

- 1.1. The part of the Pharmacy used for provision of the service provides a sufficient level of privacy and safety
- 1.2. The Pharmacy has a duty to ensure that staff involved in the provision of the service have relevant knowledge and are appropriately trained in the operation and provision of the service. Advisers must be a NCSCCT certified practitioner. Smokefree Hampshire will keep Pharmacies updated of training opportunities as they arise.
- 1.3. Smokefree Hampshire will provide training and support at no cost to the Pharmacy
- 1.4. The Pharmacy has a responsibility to maintain appropriate records as detailed in service schedule (1.9 – 1.13) to ensure effective ongoing service delivery and audit.
- 1.5. The Pharmacy has a duty to ensure that staff involved in the provision of the service are aware of and act in accordance with local protocols and NICE guidance.
- 1.6. Smokefree Hampshire will supply a Carbon Monoxide monitor, consumables and servicing as required. This will be returned to Smokefree Hampshire if the contract is relinquished. The Pharmacy will be required to pay for a replacement if they are found negligent in maintaining the monitor or lose it.
- 1.7. Access routes to this service will be determined locally, however they could include:
  - 1.7.1. Pharmacy referral as a result of the 'Promotion of Smokefree Hampshire (Public Health)' or 'Signposting' Essential Services.
  - 1.7.2. Direct referral by the individual
  - 1.7.3. Referral by another health or social care worker
  - 1.7.4. A Fitness for Surgery referral via Smokefree Hampshire
  - 1.7.5. **Referrals into the pharmacy service**
    - Directly referred clients who indicate that they wish to quit at a pharmacy, will be assigned as a new client by Smokefree Hampshire.
    - Smokefree Hampshire will inform the pharmacy staff by phone or email of the referred client.
    - The pharmacy should attempt to contact the client within 2 working days to arrange appointment.

- 1.7.6 Drug tariff prices will be updated quarterly by Smokefree Hampshire
- 1.8. The **initial assessment** includes:
- 1.8.1. Asking if the client would like to make an attempt to stop smoking and receive weekly advice and support to stop
  - 1.8.2. Assessing how ready the client is to make a change
  - 1.8.3. Providing information for the client to make a fully informed decision on where they choose to access stop smoking treatment.
  - 1.8.4. Referring clients to alternative service providers when this is the client's choice.
  - 1.8.5. Pregnant women should be referred to the Smokefree Hampshire service. They are not part of this SLA contact and you will receive no payment for seeing them.
  - 1.8.6. Clients with a SMI must be offered a referral to Smokefree Hampshire specialist service.
  - 1.8.7. Repeat service users are to be directly referred to Smokefree Hampshire for support.
  - 1.8.8. Evidence shows that weekly consultations (face to face or by telephone) with clients are most effective. This should be the aim of the service provider, particularly in the first four weeks post quit date. We do accept, however, that on occasions this may be unachievable for the client or service provider. Providing performance measures are maintained, fortnightly appointments may be scheduled on occasions but not as routine
  - 1.8.9. All advisers must have a valid DBS, copy of which to be shared with Hampshire Smokefree.
- 1.9. The **initial treatment session** includes:
- 1.9.1. Initial session should be a minimum of 30 minutes long
  - 1.9.2. Completing the Smokefree Hampshire data entry
  - 1.9.3. Elicit and record consent from client for treatment programme and agreement for Smokefree Hampshire to contact them up to 18 months after treatment for follow up and audit purposes.
  - 1.9.4. Setting a target quit date with the client
  - 1.9.5. Assessing the clients' smoking behaviour using the Fagerstrom score e.g. are they a highly dependent smoker?
  - 1.9.6. Taking an initial CO reading for baseline assessment and explaining its use as a motivational aid
  - 1.9.7. Explaining the benefits of quitting smoking
  - 1.9.8. Discussing the clients' key concerns about quitting
  - 1.9.9. Identifying treatment options with the client
  - 1.9.10. Agreeing a treating plan with the client, including coping strategies to maximise commitment to the target quit date

1.9.11. Provide one week's supply of the chosen NRT product(s)

(Any clients who express an interest in using bupropion or varenicline or a vape must be referred to the Smokefree Hampshire specialist service)

1.9.12. Explanation of the use of the chosen product(s)

1.9.13. An action plan for the week ahead

1.9.14. An appointment for 7 days' time or pre-arrange contact by telephone or text message

1.9.14. Providing the client, the contact number for the pharmacy, and the Smokefree Hampshire Helpline number 01264 563039 / 0800 772 3649 and [www.smokefreehampshire.co.uk](http://www.smokefreehampshire.co.uk) to ensure the client has easy access to advice and support at all times

1.9.15. Client service evaluation forms as supplied by Smokefree Hampshire to be provided to all clients. Pharmacies should aim to have 30% of clients setting a quit date returning completed forms – see performance measures. Form can be found at [http://bit.ly/SMOKEFREE\\_HAMPSHIREantsfeedback](http://bit.ly/SMOKEFREE_HAMPSHIREantsfeedback)

1.9.16. Supply of treatment must be recorded on the client's pharmacy medication record (PMR)

1.10. The **2<sup>nd</sup> – 4<sup>th</sup> treatment sessions** include:

1.10.1. Follow on sessions should be a minimum of 15 minutes long

1.10.2. Reflection on the previous week, addressing any key issues or problem areas

1.10.3. Self-reported smoking status preferably followed by a CO test for validation (and ensuring this is recorded)

1.10.4. Reinforcing week on week success

1.10.5. Making further weekly appointments

1.10.6. Further one-week supply of product unless it is the third or subsequent week of treatment when up to two weeks supply may be given

1.10.7. Following up missed appointments with telephone contact and / or written contact

1.10.8. Referral to Smokefree Hampshire of clients who choose to or require more intensive support following failure to quit

1.10.9. If client continues to smoke after their quit date, treatment should be limited to one further week of treatment only. Following this week, if the client is still using tobacco the treatment programme should be terminated and recorded as a fail.

1.10.10. Completion of the Smokefree Hampshire data entry including session notes, for example, Product information and product usage, behavioural support given, e.g. support for triggers, routine strategies, hobbies, deep breathing, any issues reported, smoking status

1.11. The **5<sup>th</sup> treatment session (4-week quit assessment)** includes:

1.11.1. Self-reported smoking status, preferably followed by a CO test for validation (and ensuring this is recorded)

1.11.2. Congratulating the client on their quitting success and provide a certificate

1.11.3. Recording change of their smoking status and quit success



- 1.11.4. In line with DH guidance there is an allowance of 14 days following the end of treatment for a client to be followed up and recorded as a 4-week quitter
- 1.11.5. Clients must be followed up by day 42 past their quit date
- 1.11.6. **A 4-week quit is defined by the Department of Health as Set Quit date plus 25 to 42 days. Clients whose follow up date falls outside this time span may not be counted for the DH submissions and, therefore will not be paid for.**

1.12. Clients can be supported for between 4 and 12 weeks in total, ideally weekly but may be seen fortnightly following their 4-week quit date.

1.13. **Twelve weeks post quit date follow up session is recorded, and the client episode is completed between the 12 and 14 weeks post quit date.**

Attempt to contact 100% of 4 week quits. Confirm if client is still quit and smokefree by text, telephone or in person or if has relapsed. Congratulate client on remaining quit, discuss any concerns.

Invite back if client has relapsed. If relapsed client, has a serious mental illness of two or more long term conditions, they should be referred to the Smokefree Hampshire the specialist service.

Record status (Quit, fail or lost)

1.14. ***Young people under 18 years:***

1.14.1. Young people from the age of 12 who are regular smokers can receive NRT provided they are monitored regularly and are only supplied with one week of NRT at a time.

1.14 **Pregnant women:**

**All pregnant women** should be referred to the Smokefree Hampshire service for specialist help and support

## APPENDIX 2

### Assessment of Nicotine Dependence

This is a particularly useful tool to determine a clients' dependence. It is a series of questions that are scored out of 10. Of all the questions, the most vital is "How soon after you wake up do you smoke your first cigarette?" If it is within half an hour this tells you that your client is very dependant. The score is out of 10, so the higher the score the more dependent the smoker.

### The Fagerström Test for Nicotine Dependence

How many cigarettes per day do you usually smoke? <i>(Write the number in the shaded box)</i>	<b>per day</b>	<b>&lt; 10 0</b> <b>11-20 1</b> <b>21 –30 2</b> <b>31+ 3</b>
How soon after you wake up do you smoke your first cigarette? <i>(Circle the appropriate number)</i>	<b>Within 5 minutes</b> <b>5-30 minutes</b> <b>More than 30 mins</b>	<b>3</b> <b>2</b> <b>1</b>
Do you find it difficult to stop smoking in no-smoking areas?	<b>No</b> <b>Yes</b>	<b>0</b> <b>1</b>
Which cigarette would you hate most to give up?	<b>The first of the morning</b> <b>Other</b>	<b>1</b> <b>0</b>
Do you smoke more frequently in the first hours after waking than during the rest of the day?	<b>No</b> <b>Yes</b>	<b>0</b> <b>1</b>
Do you smoke if you are so ill that you are in bed most of the day?	<b>No</b> <b>Yes</b>	<b>0</b> <b>1</b>
Score	<b>/10</b>	

### Scoring

The maximum score which can be achieved is 10, the lowest is 0.

Score Indicates:

3 or less Light smoker

4 – 8 Addicted smoker

9 or above Heavy smoker

This information can be used to help determine suitability and dosage of Nicotine Replacement.