

SMOKING CESSATION SERVICE

Welcome and Introduction

Agenda

Running Order:

Introduction

Adam Irvine, CPCW

Implementation and Status

Jan Ward, MLSCU

Wirral Update

Safwa Alsaden, ABL

PharmOutcomes Information

Gary Pickering, CPCW

Q&A

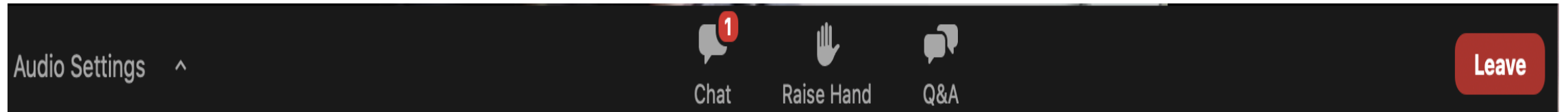
All



WEBINAR HOUSEKEEPING: USING ZOOM



- All attendees are automatically muted
- Use the Q&A button in Zoom to ask the presenters questions
- Type in your message and a presenter will either respond during the webinar if they can or at the end in the Q&A session



INTRO AND OVERVIEW



- CPE Resources are there. We're not going to repeat them as many will have viewed already. If you haven't, please access them afterwards here: cpe.org.uk -> National Pharmacy Services -> Smoking Cessation Service
- Good guidance and a checklist that contractors and teams can use there
- Equipment needs sorting as does training requirements. Helpful to link your own timeline with the hospitals local to you.

Smoking Cessation Service Implementation

Jan Ward - MLCSU Medicines Optimisation Pharmacist

Agenda



- Background – Long Term Plan & Ottawa Model of Smoking Cessation
- Pilots – overview & outcomes
- National implementation update
- Q&A

Background (1)



- NHS Long Term Plan (LTP): commitments
 - Prevention is a core component of the NHS Long Term Plan (LTP). The LTP commitments that set out the NHS's contribution to tackling tobacco dependence include:
 - By 2023/24 all people admitted to hospital who smoke will be offered NHS-funded tobacco treatment services
 - Acute, Maternity and Mental Health services
- The commitments are designed to:
 - Be the NHS's contribution to helping deliver a smokefree generation
 - Build on the good work already being delivered and to compliment current Stop Smoking Services
 - Focus on both physical and mental health services
 - Introduce a level of national direction, but with local development and delivery



Background (2)

- Smoking cessation programmes already exist in community settings but are variable in their involvement of pharmacy
- Hospitals are adopting the Ottawa Model for 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)

Background (3)



The aim of the NHS Smoking Cessation Service (SCS) is:

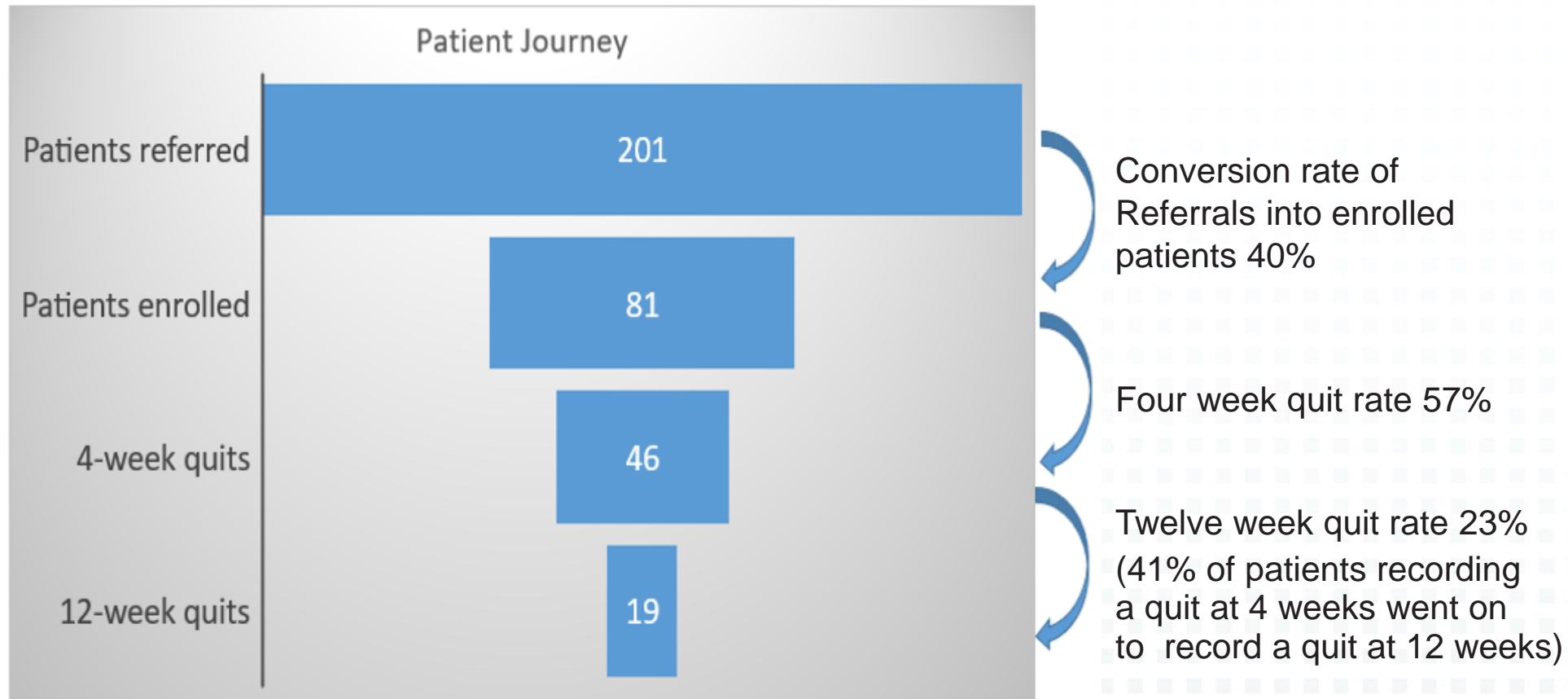
To support delivery of the prevention ambitions in the NHS LTP, and for community pharmacy to become a nationally available choice for patients to access smoking cessation support post discharge.

Smoking Cessation Transfer of Care Pilots



- A pilot service was introduced in October 2020 with the first location being referrals from Royal Oldham Hospital to pharmacies in the Oldham area
- Pharmacies were selected following an Expression of Interest process, to give good geographical coverage and extended opening hours
- A second pilot area went live in November 2021 in the Lambeth and Southwark boroughs of London, working with Guys and St Thomas' Hospital and King's College Hospital
- The pilots have now transitioned into the Smoking Cessation Service (SCS)

Pilot Data Overview: Oct 2020 to Dec 2021





Transitioning the pilot into the SCS

- Standard Treatment Programme (STP) developed with National Centre for Smoking Cessation and Training (NCSCT)
- Service funding agreed (CPE [formerly PSNC] & NHSE)
 - **Consultation fees – Community Pharmacy Contractual Framework (CPCF)**
 - **NRT costs to be recharged back to the ICB**
- NHS Smoking Cessation Service (SCS) specification agreed
- Service launched to align with National No-Smoking Day (10 March 2022)
 - Registrations opened on 1 March 2022
 - **Intentional ‘soft launch’**

National Implementation of SCS



The role of the CSU's

- Scoping and mapping
 - Understand the exact position of each Acute Trust in terms of their delivery of the relevant parts of the LTP
 - Inform planning
 - Identify key stakeholders to support working groups
- Facilitate implementation at local level
 - Advisor available for each region
 - Ensure pilot sites transition successfully
 - Engage with early implementers and those sites looking to start delivery imminently
- Production of supporting documents and promotional material

3 stage process to Go-Live



Stage 1:

Scoping & Mapping

Initial engagement and establishment of working group(s).

To include OHID, Public Health, LPC, Acute Trust, ?Locally Commissioned Service

Stage 2:

Pathway agreement

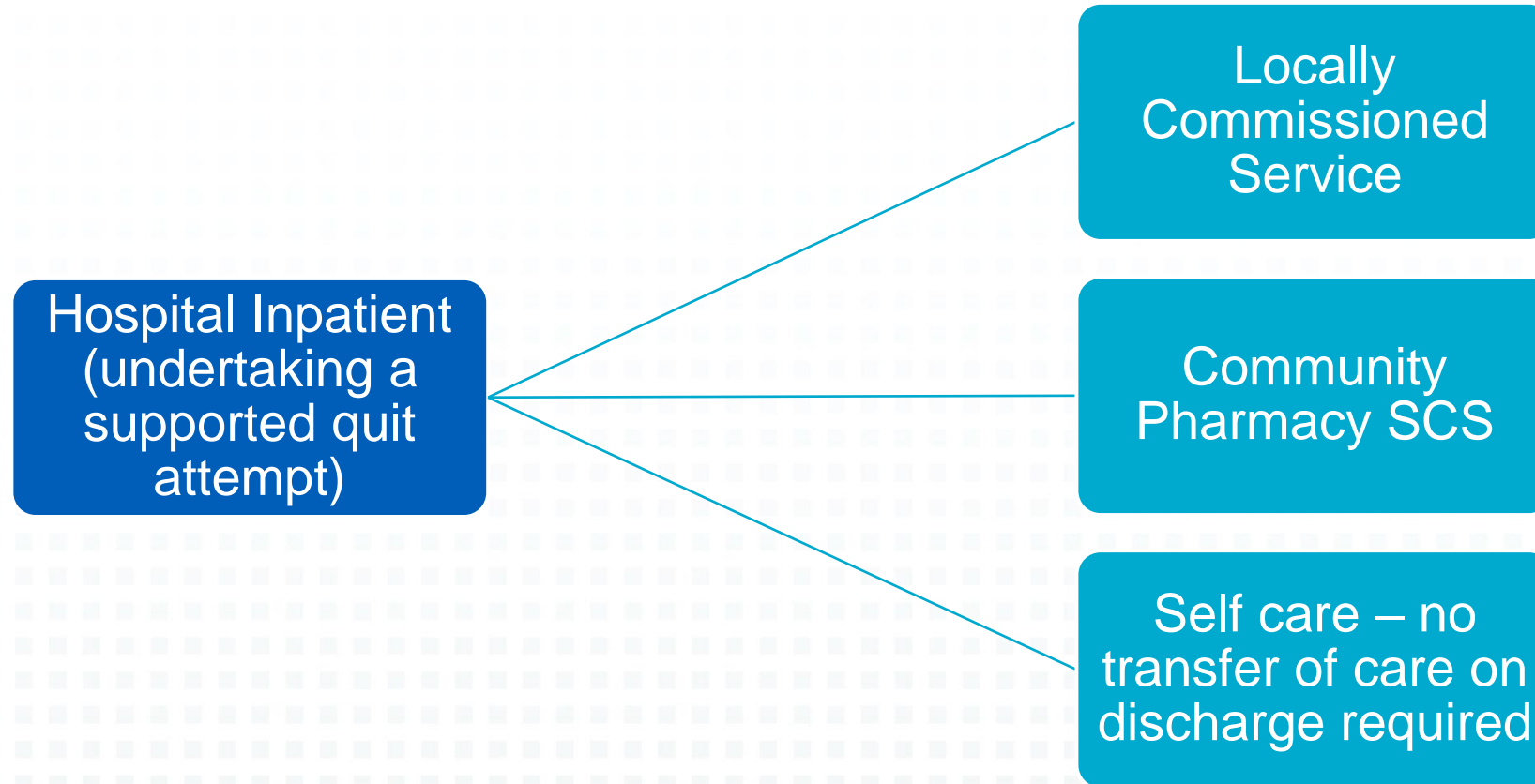
Agree the pathway and the method of sending a digital referral.

Stage 3:

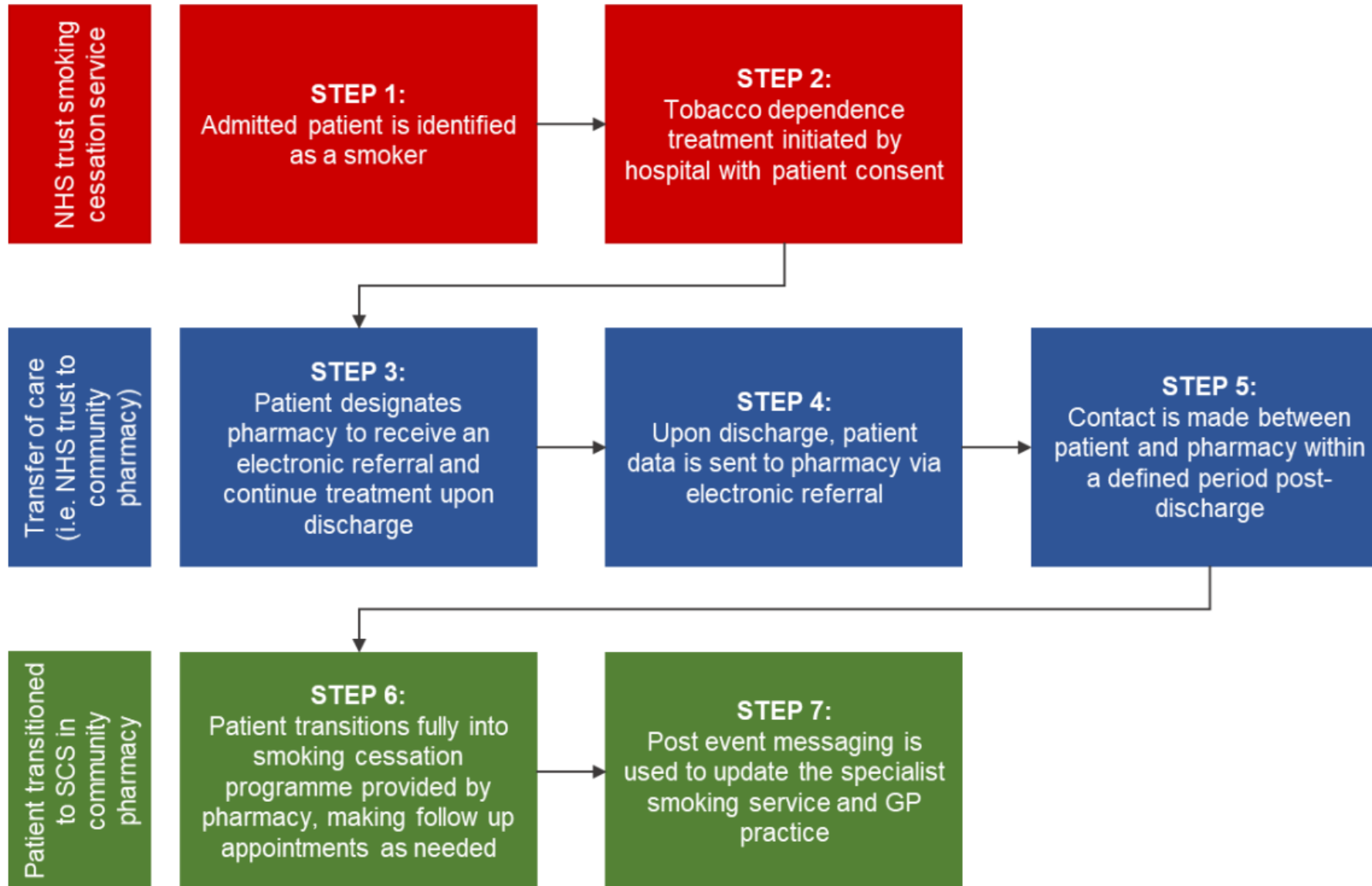
Community pharmacy engagement

LPCs can confidently recruit community pharmacy support.

Pathway



NHS SCS Model of care



NHS SCS training



- The National Centre for Smoking Cessation Treatment (NCSCT) Stop Smoking Practitioner Certification (pharmacists or pharmacy techs that are already certified do not need to repeat their training for the purposes of this service)
- Specialist NCSCT modules to support treatment for people with a mental health condition and pregnant women (these must be completed after the NCSCT Practitioner training has been successfully completed)
- NCSCT module on using e-cigarettes
- Pharmacists/pharmacy techs must have read the NCSCT Standard Treatment Programme (STP), which will be used to support consultations
- Also need CO monitor and SOP in place to sign up on BSA

NHS SCS overview for community pharmacy (1)



- Intended to **compliment existing** locally commissioned stop smoking services
- Can **only see patients** in the SCS who have been **referred from the NHS Acute Trust** and who wish to initiate / continue a quit attempt post discharge
- Patient **contact within 5 days** of referral, at least **3 attempts** to make contact, if no contact then must inform the referring Trust
- Pharmacies will provide support up to **12 weeks**
- Consultations (no more than 2 weeks apart) can be delivered **face to face or remotely**, with NRT supply (max 2 weeks at a time) from **agreed** list of GSL products in Drug Tariff

NHS SCS overview for community pharmacy (2)



- **Clinical record** to be made of all service activity
- **CO monitoring** for face to face consultations
- **No charges to patients**, even if they pay for prescriptions
- Patient level outcome **data required to be returned** to the referring NHS Acute Trust & patient's GP
- Fees: **£1000** set-up fee and then **£30** initial consultation, **£10** interim consultations, **£40** last consultation (which can be any time from week 4 to week 12) – submit claims on **NHSBSA MYS**

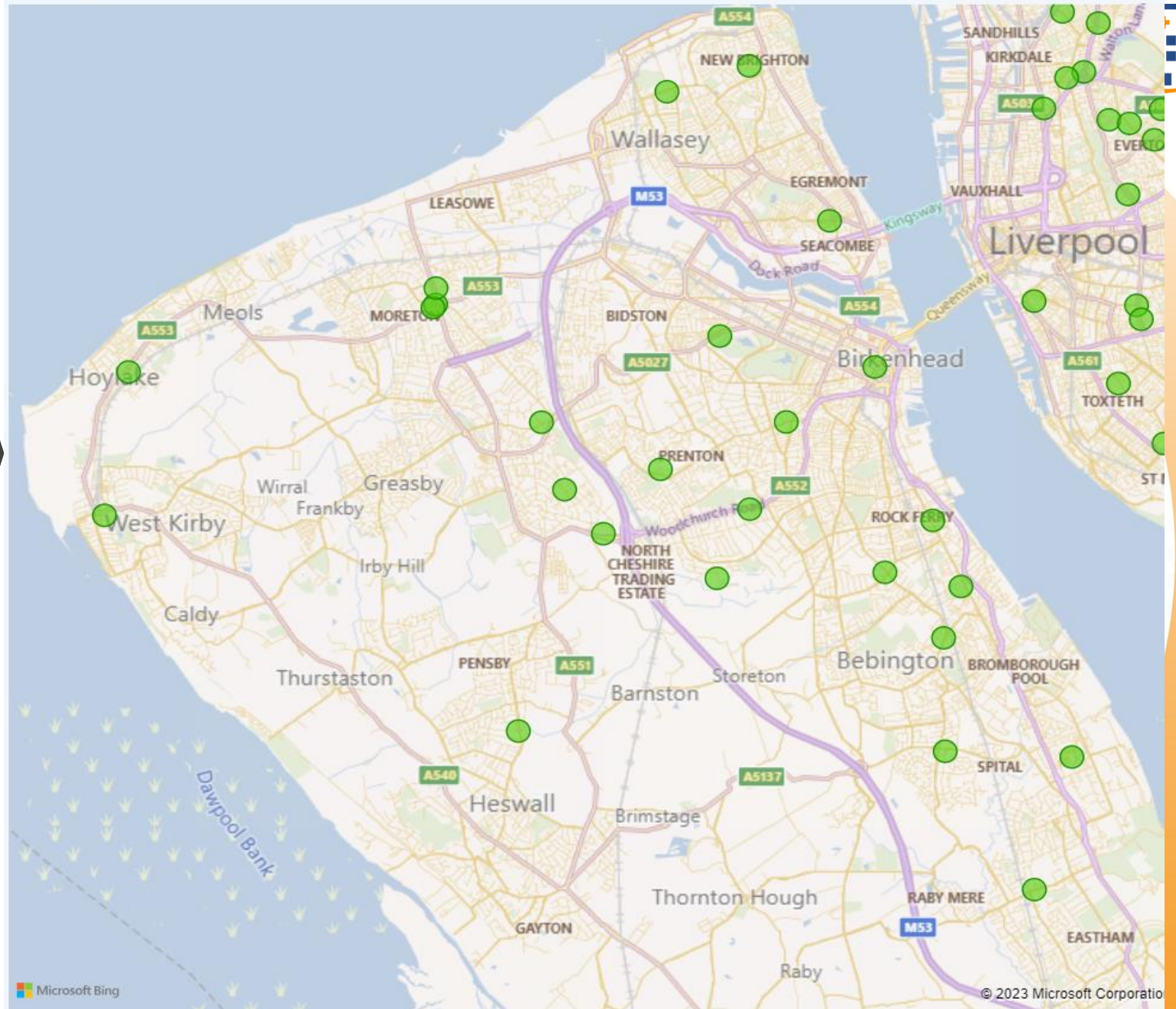
NHS SCS implementation update: Trust status



Region Name	ICS Name	Acute Trust Name	ODS Col	Stage 1 Contact and Engagemen	Stage 2 Working Groups Established	Stage 3 LPC Contact and Engagemen	Trust Live
North West	CESHIRE AND MERSEYSIDE	LIVERPOOL UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	REM				01/08/2022
North West	CESHIRE AND MERSEYSIDE	MID CHESHIRE HOSPITALS NHS FOUNDATION TRUST	RBT				05/12/2022
North West	CESHIRE AND MERSEYSIDE	WIRRAL UNIVERSITY TEACHING HOSPITAL NHS FOUNDATION TRUST	RBL				19/06/2023
North West	CESHIRE AND MERSEYSIDE	ST HELENS AND KNOWSLEY TEACHING HOSPITALS NHS TRUST	RBN				TBC
North West	CESHIRE AND MERSEYSIDE	THE CLATTERBRIDGE CANCER CENTRE NHS FOUNDATION TRUST	REN				TBC
North West	CESHIRE AND MERSEYSIDE	THE WALTON CENTRE NHS FOUNDATION TRUST	RET				TBC
North West	CESHIRE AND MERSEYSIDE	LIVERPOOL HEART AND CHEST HOSPITAL NHS FOUNDATION TRUST	RBQ				TBC
North West	CESHIRE AND MERSEYSIDE	SOUTHPORT AND ORMSKIRK HOSPITAL NHS TRUST	RVY				TBC
North West	CESHIRE AND MERSEYSIDE	WARRINGTON AND HALTON TEACHING HOSPITALS NHS FOUNDATION TRUST	RWW				TBC
North West	CESHIRE AND MERSEYSIDE	COUNTESS OF CHESTER HOSPITAL NHS FOUNDATION TRUST	RJR				
North West	CESHIRE AND MERSEYSIDE	EAST CHESHIRE NHS TRUST	RJN				

NHS SCS: Pharmacy registrations

Status ● Registered



Useful references

Community Pharmacy England page:

<https://cpe.org.uk/national-pharmacy-services/advanced-services/smoking-cessation-service/>

Service spec:

<https://www.england.nhs.uk/primary-care/pharmacy/pharmacy-integration-fund/nhs-smoking-cessation-transfer-of-care-pilot-from-hospital-to-community-pharmacy/>

MLCSU dashboard:

<https://medsopt.midlandsandlancashirecsu.nhs.uk/nhs-smoking-cessation-service/>

Standard Treatment Programme (STP):

https://www.ncsct.co.uk/pub_NHS-pharmacy-SCS.php

Smoking Cessation Service Implementation

Thank you for listening

WIRRAL TEACHING HOSPITALS

ABL Smoking Cessation Services
Elizabeth Woodworth & Safwa Alsaden



Safwa Alsaden
Specialist Tobacco Dependency Practitioner- Secondary care
ABL Health Ltd

**Secondary care tobacco dependency
treatment programme**
Wirral University Teaching Hospital – Arrowe Park

Healthier, Happier for longer

A socially driven community healthcare company

Development of the secondary care service

2007

- Start of electronic referrals from secondary care to Wirral SSS.
- Part-time service

2016

- Re-launch of WUTH smoke-free policy
- **Appointment of a full-time hospital based ABL TDTP**
- Launch of bedside tobacco treatment support programme
- Development of the electronic referral system and treatment pathways
- Introduction of an automated opt-out referral system
- Introduction of a PGD for NRT
- Staff training
- In-house stop smoking support for staff

Client Journey

Client identified as a smoker during initial assessment by ward/ departmental staff.
Brief Intervention given and hospital smoke-free policy reiterated.

NRT prescribed/PGD

Automated opt-out referral sent via Cerner directly to hospital
based advisor

Client reviewed by the advisor and assessment made

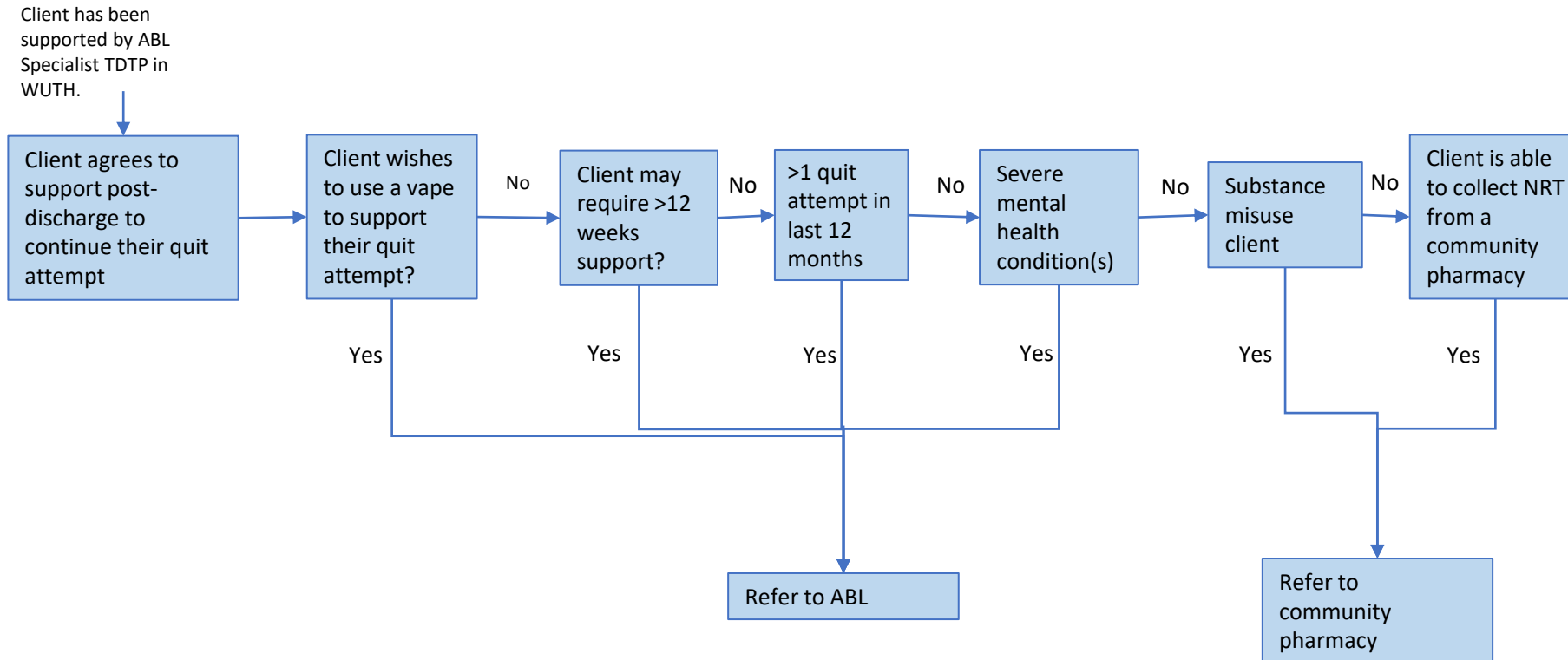
Client reviewed frequently during hospital stay – prepared for
discharge

Client seen prior to discharge. 1 week of NRT given TTOs
Agree post discharge f/up appointment date/time

Client followed up weekly in the community by stop smoking
advisor for 12 weeks (F2F – telephone -home visits).
F/up calls at 26 and 52 wks.

- 40.5 - 57% of patients supported to quit smoking during hospital stay opt to have ongoing support after discharge.
- Successful 4 week quit rate: 67%.
- Very low lost to f/up rate of 5%.

Smoking Cessation referral on discharge



Note:

The referral destination should be the client's choice. Guidance can be provided by the referrer using the information in this process.

ADVANCED SMOKING CESSATION SERVICE

PharmOutcomes

Presenters

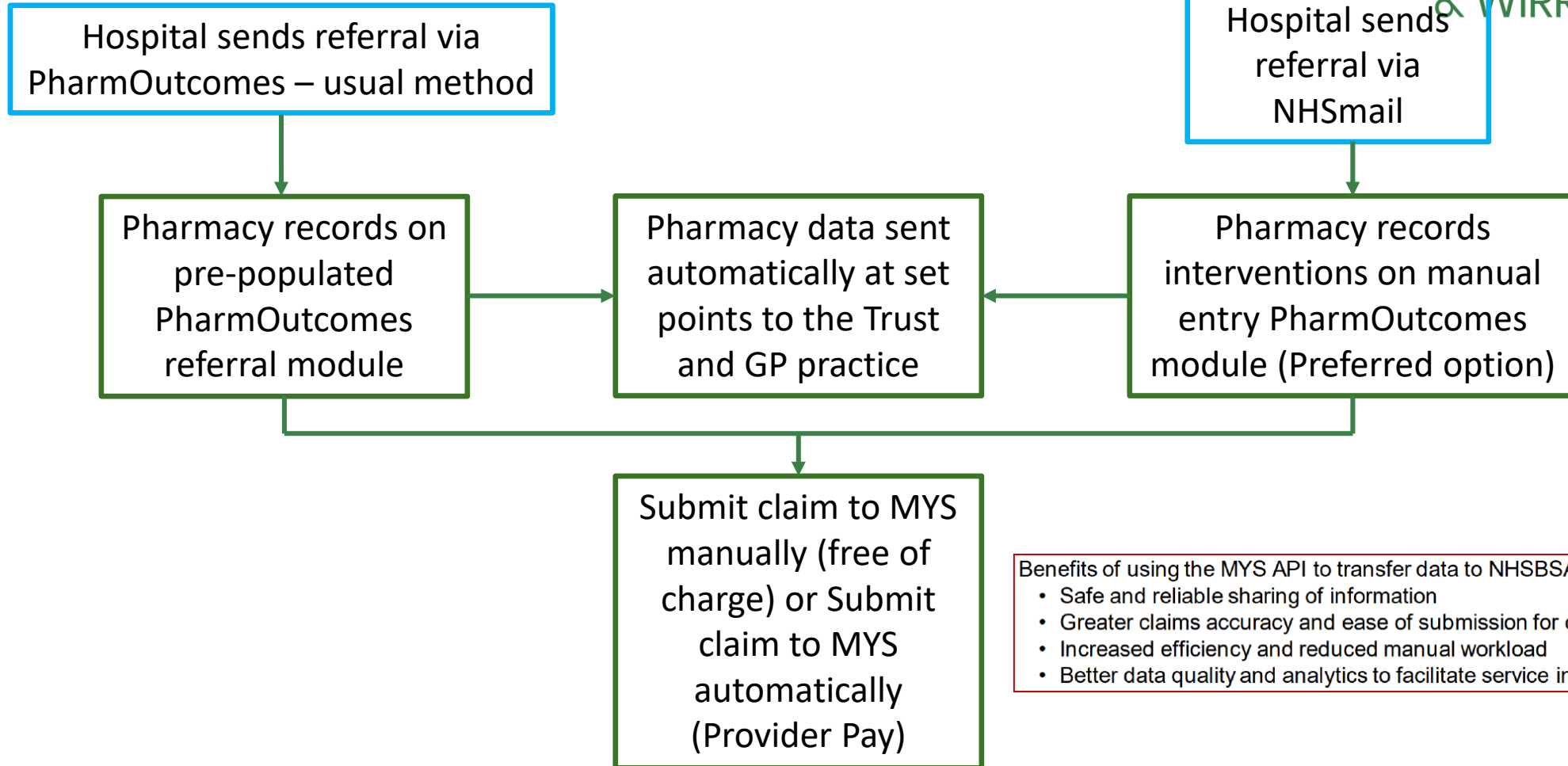
Gary Pickering: Community Pharmacy Cheshire & Wirral

PHARMOUTCOMES REFERRAL



- The service **always starts** with a referral from hospital to community pharmacy
- The PharmOutcomes solutions support the hospital team to record patient demographics, quit date and details of NRT supplied
- On hospital discharge, this information can be referred to the patient's chosen community pharmacy for ongoing support

IT PATHWAY



- Benefits of using the MYS API to transfer data to NHSBSA:
- Safe and reliable sharing of information
 - Greater claims accuracy and ease of submission for contractors
 - Increased efficiency and reduced manual workload
 - Better data quality and analytics to facilitate service improvement

PHARMACY DATA RECORDING VIA PHARMOUTCOMES



- The PharmOutcomes National Smoking Cessation templates will be available to all pharmacies that have signed up to deliver the service from the beginning of August 2022
- Pharmacies can use a set of linked templates to record a patient's progress through their behavioural change support, these include:
 1. An initial intervention template following receipt of referral. This is directly linked to the referral received
 2. An interim appointment template to record weekly visits for support
 3. A 4 and 12 week quit template to record the patient outcomes
 4. An onward referral mechanism to send information on to another community pharmacy (supports onward referral as either PharmOutcomes to PharmOutcomes or via nhs.net where the onward referral pharmacy may not use the PharmOutcomes solution)
 5. A mechanism to record referrals received by the pharmacy via email (manual entry)

COST OF PHARMOUTCOMES TEMPLATES



- Initial use of the template will be free of charge until the Pinnacle provider pays service management tool “PharmOutcomes Direct” is in place
- The cost of the Service templates will eventually fall into the “provider pays” Pinnacle service portfolio for those pharmacies who want to continue with the MYS integration
- The cost of PharmOutcomes to contractors will mirror arrangements currently in place for CPCS and pharmacies will have the option to pay for support via our Affinity group partners

Completion of SCS service follow-ups without claim management	Community Pharmacy	Free of Charge
Completion SCS service follow ups with claim management	Community Pharmacy	Transactional charging

WHEN CHARGES WILL APPLY



- Pharmacies will be given notice before the move to provider pays takes place
- Pharmacies can continue with claim management functionality or revert to the free option
- PharmOutcomes are working to implement claims functionality as soon as possible
- When this work is complete, saving the record in PharmOutcomes will auto populate the MYS claim, eliminating the need for double data entry into the MYS portal (if sign up to Provider Pays completed)

Resources



- Video guides to the PharmOutcomes is available on our YouTube from the Liverpool go launch (<https://www.youtube.com/watch?v=IAXSN3QyvVk>)
- Provider guides on PharmOutcomes are live – they're under:
 - Provider Support Guides
 - Specific Service Delivery Guides
 - Smoking Cessation Client progress

QUESTIONS & ANSWERS

Please use the Q&A facility at the end.