Definition of specialist/intensive smoking cessation support
Revised by database project board – April 2012.

Specialist smoking cessation services (SCSs) offer intensive, evidence-based support in line with the definition and recommendations throughout *A Guide to Smoking Cessation in Scotland 2010* (NHS Health Scotland and ASH Scotland)


The term ‘NHS smoking cessation services’ assumes that any intensive smoking cessation support provision within an NHS Board area (i) will form part of that NHS Board’s SCSs and that (ii) it will be delivered to the same standards.

The national community pharmacy smoking cessation scheme offers 12 weeks of structured behavioural support (ordinarily 1:1) and NRT in accordance with national service specifications. Further details are available from Community Pharmacy Scotland or from the local NHS Board Consultant in Pharmaceutical Public Health.

Smoking cessation services vary from region to region and evolve over time according to need. However, the following are integral components:

- provide intensive support
- operate to nationally agreed standards as outlined above
- an NHS supported service
- staff who have:
  - attended nationally recognised training
  - dedicated time to deliver group and/or 1:1 support which is:
    - for a series of planned/scheduled sessions in which a target quit date is set and support provided throughout the quit attempt through multi-session, intensive, structured behavioural support
    - offered in conjunction with pharmacotherapy (as appropriate)
    - with follow-up of the client at one month, three months and one year post quit-date and with outcomes recorded.

The following definition therefore applies to all forms of intensive/specialist support including those from specialist NHS smoking cessation services and the national pharmacy smoking cessation scheme:

A specialist/intensive service is…

- Dedicated (and for short or longer sessions).
- Provided by specially trained staff.
- Providing an enhanced level of smoking cessation support beyond that provided as part of routine care such as brief interventions and/or the provision/prescribing of pharmacotherapy.

…an NHS supported service…

- Normally funded by the NHS, but may include services trained by the NHS (e.g. the national pharmacy scheme), or working to the same levels.

…with staff who have attended nationally recognised training and who have dedicated time…

- Nationally recognised = complying with the Scottish national smoking cessation training standards, e.g. PATH (Partnership Action on Tobacco and Health) modules,
equivalent local training or that provided by NHS Centre for Smoking Cessation and Training (NCSCT) and that is commensurate with the type of support provided.

- Pharmacists would ideally undertake the above training and may also wish to undertake the NES (NHS Education for Scotland) distance learning pharmacy pack.
- Additional, specialised training should be undertaken if working with specific groups.
- Training should reach or be designed to reach national standards in Scotland.
- Relevant updates/CPD should be undertaken regularly.

**...to deliver group and 1:1 support...**

- Evidence and current guidelines support face-to-face group and 1:1 support where practically possible, supplemented with proactive telephone support where desirable and because of geographical constraints.
- Generally, specialist SCSs provide group support, the national pharmacy scheme provides 1:1 support, and telephone support is provided as a supplement to or substitute for (if practically not possible to provide continued) face-to-face support in rural and remote areas following on from initial face-to-face sessions.

**...for a series of planned/scheduled sessions in which a target quit date is set and support provided throughout the quit attempt through multi-session, intensive, structured behavioural support...**

- Ordinarily, there is at least one pre-quit session and at least four post-quit sessions. For specialist SCSs, this is normally a minimum of four 1:1 sessions or seven group sessions.
- For pharmacy services as part of the national scheme, this would involve weekly behavioural (ordinarily 1:1) support, normally over a 12-week period.
- In both cases, this excludes opportunistic and brief advice work, but allows expert practitioners (the staff defined above with regards to training and time) to use clinical judgement.
- The first session involves assessing the client and ideally takes place at least one week before the quit date is set for, and subsequent sessions generally encourage, advise and motivate the client to quit and stay quit, e.g. through assisting them to cope with cravings and withdrawal symptoms.
- Relevant data/details are recorded to enable full completion of the national minimum dataset including the quit date.

**...and in conjunction with pharmacotherapy (as appropriate)...**

- Discussion of the option of different forms of pharmacotherapy with the client in order that adviser and client can reach the choice of which form (if any) might be best, including the option of combination NRT.
- Pharmacotherapy should be prescribed in conjunction with the setting of a quit date, on an abstinent-contingent basis, in line with *A Guide to Smoking Cessation in Scotland 2010*’s Planning and Providing Specialist Smoking Cessation Services component (pp 21–23), and supplied in accordance with local prescribing guidance, formularies and/or protocols.

**...where the client is followed up at 1 month, 3 months and 1 year post-quit date and outcomes recorded.**

- Self-report cessation outcomes.
- Carbon monoxide (CO) validation at one month.