Community Pharmacy provision of a Stop Smoking Service

SERVICE SPECIFICATION

1. Purpose of the service

- 1.1 The aim of the Service is to provide an accessible stop smoking service in the community using Nicotine Replacement Therapy (NRT) together with support and advice. The service will support clients to achieve a 4 week quit and to stop smoking permanently. (A four-week quit is defined as "not having smoked in the third and fourth week after the quit date").
- 1.2 The Service is delivered in partnership with the Be Well Tameside Pennine Care NHS Foundation Trust, commissioned by Tameside Population Health.
- 1.3 NRT products will also be supplied to clients that are recommended by other stop smoking advisors on production of an appropriate medication request letter see example appendix 4.

2. Objectives

- To offer an accessible stop smoking service in the community setting.
- To supply or administer appropriate NRT as per the criteria (appendix 1)
- To offer support and advice to help clients attempting to guit smoking.
- To educate clients on specific product advice and general stop smoking advice.

3. Eligibility

- 3.1 The Service is available for tobacco users over 12 years of age, including pregnant¹ and lactating women², identified as sufficiently motivated to quit who are referred via:
 - Primary care professionals
 - Secondary care clinicians
 - Self-referral
 - Work place
 - Other voluntary organisations
 - And other professionals

4. Standards

- 4.1 Suitable clients, i.e. those who are not excluded as per criteria listed in appendix 1 will be provided with a 1:1 stop smoking intervention and may be provided with an agreed form of NRT (gum, lozenge, patch, sublingual tablet, inhalator, nasal spray or mouth spray).
- 4.2 The stop smoking intervention/support must be provided by pharmacy staff trained in intermediate 1:1 interventions and NCSCT online assessment on core knowledge and key practice skills.

¹ Stopping smoking without NRT is preferable. However, if this is not possible, NRT may be recommended to assist a quit attempt, as it is considered less harmful to the foetus than continuing to smoke.

² For lactating women the Summary of Product Characteristics recommend using intermittent dose NRT preparations to minimize the amount of nicotine in the breast milk between feeds.

- 4.3 The pharmacist must supervise the supply of the NRT as per the instructions given in the individual products summary of product characteristics.
- 4.4 It is a recommended to offer a combination therapy, for example; nicotine patches and another form of NRT (such as gum, inhalator, lozenge, nasal spray, or mouth spray) to people who show a high level of dependence on nicotine
- 4.5 A one-week supply will usually be given together with product specific advice and motivational support. Support may also be offered via telephone where appropriate but only after the first consultation. Thereafter a maximum of 2 weeks supply is granted at a time, dependant on the motivation of the client to be smokefree.
- 4.6 If the client is successful in stopping smoking 4 weeks after the quit date (with carbon monoxide validation) treatment to be continued but reviewed every two weeks.
- 4.7 If the client is unsuccessful in their attempt to becoming smokefree or staying smokefree at 4 weeks then an individual assessment will be made as to whether to carry on with the treatment programme.
- 4.8 If the client is successfully stopped at 8 weeks then another 4 weeks supply can be given before revalidation at week 12.
- 4.9 If the client is successful in abstaining at 12 weeks then treatment should normally be gradually withdrawn after this point unless there is a strong likelihood of relapse without continuing treatment. All treatment issued by the pharmacist will follow the manufacturer's directions as stated in the products summary of product characteristics.
- 4.10 Any supply of an NRT product made to a client under this agreement must follow all parts of the individual products summary of product characteristics.
- 4.11 The provider will maintain a record of supply of NRT on their PMR and complete in full the required monitoring forms for clients seen by a pharmacy staff.
- 4.12 It is recommended that if a client misses/does not attend (DNA) an appointment, you should follow-up the client in the following way; attempt 2 phone calls, if still no response send a letter. If the client fails to make contact or re-book an appointment they can be reported as 'lost to follow' (make note on their record and on the monitoring form).
- 4.13 NRT products will also be supplied to clients that are recommended by other stop smoking advisors on production of a medication request letter see example appendix 4. The cost price of the product can be claimed (excluding VAT) plus a fee per transaction.

5. Pennine Care Be Well Service

- 5.1 The Pennine Care Be Well Tameside is commissioned by Tameside Council/the Tameside and Glossop Single Commission to provide support to Pharmacies delivering this service. As part of their remit they will:
 - Provide training to pharmacy staff in stop smoking behavioural support and advice, administering of NRT, as well as information on electronic cigarettes and vaping.
 - Conduct observational assessments to ensure advisors are meeting service requirements and adhering to Public Health England – Service & Delivery Guidance
 - Supply and maintain carbon monoxide monitors
 - Receive all monitoring and payment information from the pharmacies to validate and authorise payments
 - Review the quality of data returns received from providers

5.2 Pharmacies are expected to work alongside the Pennine Care NHS Foundation Trust Be Well Tameside to deliver this service.

6. Staff Training Requirements

- 6.1 Members of staff and pharmacists will be trained by Be Well Tameside in stop smoking behavioural support and the administration of NRT by completing the level 2, 1:1 Intermediate stop smoking course.
- 6.2 Upon completing the level 2, 1:1 Intermediate stop smoking course, members of staff are also required to complete an online NCSCT assessment of core knowledge and key practice skills. It is a nationally recognised and accredited knowledge based training that covers up to date evidence based theory in stopping smoking.
- 6.3 Continued training is required in the form of regular annual updates in stop smoking and NRT evidence based practice in accordance with local and national policy/guidelines and codes of professional conduct. It is compulsory for all trained intermediate advisors to attend annually, upon invitation, in order to continue to deliver stop smoking service.
- 6.4 The service may not commence until the required training has been completed. If there are no members of staff accredited to provide the service within the Pharmacy the service will be suspended and may be ceased. The service may recommence once staff have received the required training.
- 6.5 The provider must ensure that accredited staff are present to oversee the service on a regular basis and inform the Commissioner if this is not achievable.
- 6.6 If there are no trained members of staff available at the pharmacy to deliver the stop smoking service, delivery must cease until staff have been trained but the pharmacy may continue to dispense and claim for NRT where they receive an appropriate medication request letter.

6. Equipment

- 6.1 A carbon monoxide monitor will be provided and maintained by Be Well Tameside. Some monitors require calibration every six months and the pharmacy is responsible for notifying the Tameside Be Well Service when calibration is due, and the replenishment of disposable mouth tubes and the plastic adaptors.
- 6.2 See appendix 5b for guidance on using CO monitors.
- 6.3 Pharmacies will be required to ensure that measures are in place so that all service delivery is COVID-19 secure. If face-to-face provision is considered alongside local coronavirus restrictions, with the thought of offering CO monitoring, staff should ensure that they follow the manufacturer's guidance on the safe handling/cleaning of monitors and in addition to the COVID-19 specific guidance. (For more information: Face to face support and CO monitoring guide (ncsct.co.uk)

7. Payment

- 7.1 Payments will be made on a monthly basis in arrears on submission of an invoice and accompanying documentation. See appendix 2.
- 7.2 The payment schedule is as follows:

£10 for registration onto the Be Well Tameside and support. (Copy of monitoring form sent to Be Well Tameside will add on to the database)

£25 for attaining 4 week quit (preferred confirmation via CO validation but can be self-reported). Please note: The Department of Health defines a four-week quit as "not having smoked in the 3rd & 4th week after the quit date"

£5 for Carbon Monoxide Validation at 4 week quit (Department of Health recommend all advisors conduct pre quit CO validation, preferably at first consultation)

£1 for dispensing per item from the letter of recommended NRT by advisors. A copy of this letter must be returned with your invoice.

- 7.3 Payment may not be made if data and invoices are not submitted by the agreed timescale and cut-off date in agreement with Be Well Tameside.
- 7.4 Invoices should include only clients who have either:
 - completed the programme, achieved a 4 week guit or
 - prematurely terminated the programme during the quarter
- 7.5 NRT products can be claimed at cost price, excluding VAT. This is based on the following legislation:

"The Supply [of Drugs] dispensed to an individual for his **personal use** where the dispensing is a [**registered pharmacist**] on a prescription of a person registered in the register of medical practitioners..." VAT Act 1994, Schedule 8, Group 1.

7.6 All invoices and accompanying documentation are to be submitted to the Pennine Care Be Well Tameside.

Address:

Be Well Tameside Pennine Care NHS Foundation Trust Acre House 51a Manchester Road Denton, Manchester M34 2AF

Appendix 1

Pharmacological Therapies

Brand	Product	
NiQuitin CQ	24 hours patch – 21mg, 14mg, 7mg (Boots NicAssist)	
	Lozenge – 4mg, 2mg	
	Mini Lozenge – 4mg, 1.5mg	
	Gum – 4mg, 2mg	
Nicotinell	24 hours patch – 21mg, 14mg, 7mg	
	Lozenge – 2mg, 1mg	
	Gum – 4mg, 2mg	
Nicorette	Invisi patch – 16 hours; 25mg, 15mg, 10mg (Boots NicAssist)	
	Nasal Spray (Boots NicAssist)	
	Inhalator – 15mg, 10mg (Boots NicAssist)	
	Gum – 6mg, 4mg, 2mg (Boots NicAssist)	
	Microtab (Boots NicAssist)	
	QuickMist – 1mg	
	Lozenge – Cools; 4mg 2mg (Boots NicAssist)	
Pfizer	Varenicline (Champix)	
GlaxoSmith Kline	Bupropion (Zyban)	

Combing behavioural therapy with pharmacotherapy increases a smoker's chances of successfully stopping by up to four times. The only stop smoking medications currently approved by NICE (**National Institute for Clinical Excellence**) are: Nicotine Replacement Therapies (NRT), Zyban & Champix.

The Cochrane Review (2013) reported that NRT, bupropion and varenicline all improve the chances of quitting, with a low risk of harms.

Combination use of NRT is as effective as varenicline, and more effective than single types of NRT.

All approved stop smoking pharmacotherapies should ideally be offered on prescription to any smoker who wants to make a quit attempt. All clients should be able to access approved stop smoking medicines simply and easily, which is made possible for pharmacies through the local commissioned service (LCS) with pharmacies.

Dosage and method of administration of NRT products:

A) Gum

Dose and method of administration

Oral administration (as resin)

Nicorette - 2mg, 4mg & 6mg gum

For individuals smoking 20 or less cigarettes a day, 2mg nicotine gum is indicated. If more than 20 cigarettes per day are smoked, 4mg nicotine gum is indicated.

6mg is for heavy (20+ cigarettes a day) smokers (only comes in fruitfusion)

Flavours: original, freshfruit, fruitfusion (no 6mg) and icywhite (sugar free) Pack Sizes – 30, 105, 210 packs

Nicotinell – 2mg & 4mg gum

For individuals smoking 20 cigarettes or less daily – one 2mg piece, 20-30 cigarettes a day a 2 or 4 mg piece, > 30 cigarettes a day a 4mg piece. Chewed slowly for 30 minutes on urge to smoke.

Normally, 8-12 pieces per day can be used, up to a maximum of 25 pieces per day.

Flavours: classic, liquorice, fruit, mint and ice mint (sugar free)

Due to the presence of liquorice (glycyrrhizin), it is contraindicated in pregnancy
and lactation. Pack Sizes – 24, 96, 204 packs

NiQuitin – 2mg & 4mg gum

NiQuitin 2mg Mint Gum is suitable for smokers who have their first cigarette of the day more than 30 minutes after waking up.

NiQuitin 4mg Mint Gum is suitable for smokers who have their first cigarette of the day within 30 minutes of waking up

Normally 8 –12 pieces of gum per day, maximum of 15 pieces of 4mg gum daily

Flavours: mint and fresh fruit (sugar free) - Pack Sizes – 336, 48, 96 packs

Boots NicAssist – 2mg, 4mg (only available in Boots Pharmacy)

For individuals smoking 20 or less cigarettes a day, 2mg nicotine gum is indicated. If smoking 20+ cigarettes per day, 4mg nicotine gum is indicated.

Flavours: original, Mintyfresh, fruitfusion & icywhite (sugar free). Pack Size – 30, 105, 210 packs

Treatment should be discontinued when the dose has been reduced to 1-2 pieces of gum per day. Use of nicotine gum products beyond 6 months is generally not recommended. Some ex-smokers may need treatment with the gum for longer to avoid returning to smoking. Clients who have been using oral nicotine replacement therapy beyond 9 months are advised to seek additional help and information from health care professionals

	One piece of gum to be chewed slowly for 30 minutes on urge to smoke.
Specific side effects:	Headache, dizziness, hiccups, gastric symptoms e.g. nausea, vomiting, indigestion, heartburn, increased salivation, sore mouth or throat, jaw muscle ache. Palpitations, erythematic, urticaria, hypersensitivity, angioneurotic oedema and anaphylactic reactions
Specific advice to client	Gum should be chewed until the taste becomes strong and then 'parked' between the gum and cheek until the taste fades. Recommence chewing once the taste has faded. This 'chew-rest-chew' technique should be applied for 30 minutes.
	Concomitant use of acidic beverages such as coffee or soda may decrease the buccal absorption of nicotine. Acidic beverages should be avoided for 15 minutes prior to chewing the gum.
	Gum is recommended in adults and children over 12 years of age. It is also indicated in pregnant and lactating women making a quit attempt. The use of gum in adolescents aged between 12 and 18 years of age is not recommended beyond 12 weeks. Not recommended for use in children under 12 years of age and non-smokers.

B) Inhalator

Dose and method of administration	Oral administration (nicotine-impregnated plug in mouthpiece).	
or administration	Nicorette Inhalator/Boots NicAssist – 15mg (Boots inhalator only available in Boots Pharmacy)	
	Inhale whenever the urge to smoke occurs.	
	Maximum daily dose: 6 cartridges. Pack sizes: 4, 20, 36 cartridge.	
	Each cartridge can be used for approximately eight 5-minute sessions, with each cartridge lasting approximately 40 minutes of intense use.	
	The cartridge is inserted into the mouthpiece according to the instructions.	
	The number of cartridges, frequency, puffing/inhalation time and technique does vary between individuals.	
	The actual time that the cartridge is active depends on the intensity of use. After about 40 minutes of intense use the maximal dose is achieved and it is about then that the nicotine amounts released from the cartridge begin to fall away, such that the cartridge is rejected by the user.	
Specific side effects	Irritation of the throat and mouth, headache, dizziness, hiccups, nausea, gastrointestinal discomfort, vomiting and nasal congestion.	
Specific advice to client	Air should be drawn into the mouth through the mouthpiece, nicotine is vaporised and absorbed by the buccal mucosa. Minimal nicotine reaches the lungs. Clients should be warned that the inhalator requires more effort to inhale than a cigarette and that less nicotine is delivered per inhalation. Therefore the	

client may need to inhale for longer than with a cigarette. (Clients may find deep drawing or short suck most effectives)

The inhalator is best used at room temperatures as nicotine delivery is affected by temperature.

Used cartridges will contain residual nicotine and should be dispose of safely. Advise the client to keep them in the case and dispose of them in household rubbish.

Nicorette Inhalator is recommended in adults and children over 12 years of age. It is also indicated in pregnant and lactating women making a quit attempt. Not recommended for use in children under 12 years of age and non-smokers

C) Lozenge

Dose and method of administration	Oral administration (nicotine as bitartrate).
	Nicorette – Cools 2mg, 4mg
	2mg Lozenge is suitable for smokers who smoke 20 or less cigarettes per day
	4mg Lozenge is suitable for smokers who smoke more than 20 cigarettes per day.
	Pack Sizes – 2mg; 20 & 80, 4mg; 80
	One lozenge should be placed in the mouth and allowed to dissolve. Periodically, the lozenge should be moved from one side of the mouth to the other, and repeated, until the lozenge is completely dissolved. You should not chew or swallow the lozenge. You should not eat or drink while a lozenge is in the mouth.
Specific side effects	Headache, nausea, hiccups, dizziness, gastrointestinal discomfort, coughing, sore mouth and throat.
Specific advice to client	Most smokers require 8 to 12 lozenges per day, not to exceed 15 lozenges
Client	Concomitant use of acidic beverages such as coffee or soda may decrease the buccal absorption of nicotine. Acidic beverages should be avoided for 15 minutes prior to sucking the lozenge.
	Nicorette Cools is recommended in adults and children over 12 years of age. It is also indicated in pregnant and lactating women making a quit attempt. Not recommended for use in children under 12 years of age and non-smokers
Dose and method	Boots NicAssist - 1mg and 2mg lozenges (only available in Boots Pharmacy)
of administration	Only to be used by adults, 18 years and over
	1mg lozenge is suitable for smokers who smoke less than 20 cigarettes 2mg or 1mg is suitable for smokers who smoke from 20 to 30 cigarettes 2mg is suitable for smokers who smoke over cigarettes
	Pack Sizes – 72, 96, 144, 204.
	One lozenge should be sucked until the taste becomes strong. Then, rest the lozenge between the gums and cheek. Suck again when the taste has faded. Repeat this routine until the lozenge dissolves completely (about 30 minutes).
	Normally, 8 to12 lozenges per day.

Specific side effects	Dizziness, headache, dryness of the mouth, hiccups, stomach trouble such as feeling sick, flatulence, heartburn, increased saliva production and irritation of the mouth and throat - this may occur when sucking the lozenge too fast, try to suck slowly.
Specific advice to client	Do not use more than thirty 1mg lozenges per day. Normally you should use the lozenges for at least 3 months, but this may vary from person to person. After 3 months, gradually reduce the number of lozenges used each day. When only using one or two lozenges per day, should stop completely.
	In general you should not use Boots NicAssist 1mg Lozenges for more than 6 months.
Dose and method	Nicotinell – 1mg, 2mg lozenge
of administration	For individuals smoking 20 cigarettes or less daily – one 1mg lozenge, 20-30 cigarettes a day a 1 or 2mg lozenge > 30 cigarettes a day a 2mg lozenge. One lozenge as per specific advice on urge to smoke. Suck until taste becomes strong, and then lodge between the gym and cheeks.
	Pack Sizes –72, 96, 144, 204
	Initially, 1 lozenge should be taken every 1-2 hours. The usual dosage is 8-12 lozenges per day. The maximum daily dose is 30 lozenges.
	Concomitant use of acidic beverages such as coffee or soda may decrease the buccal absorption of nicotine. Acidic beverages should be avoided for 15 minutes prior to sucking the lozenge.
Specific side effects	Headache, nausea, irritation to throat, increased salivation, hiccups, heartburn.
Specific advice to client	Lozenge should be sucked until the taste becomes strong and then 'parked' between the gum and cheek until the taste fades. Recommence sucking once the taste has faded. This 'suck-rest-suck' technique should be applied for 30 minutes
	Normally, treatment should continue for at least 3 months. After 3 months, the user should gradually reduce the number of lozenges or alternatively the user should switch to nicotine 1 mg lozenges and then gradually reduce the number of lozenges per day.
	Nicotinell Lozenge is recommended in adults and children over 12 years of age. It is also indicated in pregnant and lactating women making a quit attempt, but taken just after breast-feeding and not during the two hours before breast-feeding. Not recommended for use in children under 12 years of age and non-smokers.
Door and we the t	NiQuitin – 2mg and 4mg lozenges
Dose and method of administration	2mg is suitable for smokers who have their first cigarette of the day more than 30 minutes after waking.
	4mg lozenges for smokers who have their first cigarette of the day within 30 minutes of waking up.
	Pack Sizes - 36 & 72

	Weeks 1- 6: 1 lozenge every 1-2 hour hours. During this period users should take minimum of 9 lozenges per day, but should not exceed 15 lozenges a day Weeks 7 – 9: 1 lozenge every 2-4 hours Weeks 10 – 12: 1 lozenge every 4-8 hours One lozenge should be placed in the mouth and allowed to dissolve. Periodically, the lozenge should be moved from one side of the mouth to the other, and repeated, until the lozenge is completely dissolved (approx. 20 – 30 minutes). The lozenge should not be chewed or swallowed whole. The number of lozenges a day is variable and depends on the client's needs. Nonetheless it should not exceed 15 lozenges per day.
Specific side effects	Headaches, dizziness, sleep disturbance, nausea, faintness, increased appetite, irritability, anxiety dry lips, dry throat.
Specific advice to client	Users should not eat or drink while a lozenge is in the mouth. NiQuitin lozenges should not be used beyond 9 months. NiQuitin Lozenge is recommended in adults and children over 12 years of age. It is also indicated in pregnant and lactating women making a quit attempt. Not recommended for use in children under 12 years of age, non-smokers, people with hypersensitivity to peanut or soya.
Dose and method of administration	NiQuitin Minis – 1.5mg and 4mg lozenges 1.5mg is suitable for smokers who smoke 20 cigarettes or less a day. 4mg is suitable for smokers who smoke more than 20 cigarettes a day. Pack Sizes – 20 & 60 One lozenge should be placed in the mouth and allowed to dissolve. Periodically, the lozenge should be moved from one side of the mouth to the other, and repeated, until the lozenge is completely dissolved (approximately 10 minutes). The lozenge should not be chewed or swallowed whole Users should not eat or drink while a lozenge is in the mouth. Sufficient lozenges should be used each day, usually 8 – 12, up to a max of 15.
Specific side effects	Nausea, faintness, headaches, irritability, anxiety, increased appetite and insomnia, cough, sore throat, nausea, mouth/throat & tongue irritation.

Specific advice to client

Sufficient lozenges should be used each day, usually 8-12, up to a max. of 15 Use a lozenge every 1-2 hours to control troublesome withdrawal symptoms including craving.

NiQuitin Mini Lozenges is recommended in adults and children over 12 years of age. It is also indicated in pregnant and lactating women making a quit attempt. Not recommended for use in children under 12 years of age and non-smokers

D) Patches

Dose and method of administration

Transdermal administration.

Apply on to dry, non-hairy skin on hip, chest or upper arm. Remove after specified time.

New patch should be placed on a different area – avoiding 'used' sites for several days afterwards.

If successful, then gradually reduce dosage with time but review treatment if individual has not stopped smoking at 12 weeks.

Nicorette Invisi / Boots NicAssist – 16 hour patch

25mg patch for 16 hours daily for 8 weeks, then 15mg patch for 16 hours daily for 2 weeks, then 10mg patch for 16 hours daily for 2 weeks, then review treatment

Lighter smokers (i.e. those who smoke less than 10 cigarettes per day) are recommended to start at 15mg for 8 weeks and decrease the dose to 10mg for the final 4 weeks

Those who experience excessive side effects with the 25mg, which do not resolve within a few days, should change to a 15mg. This should be continued for the remainder of the 8 week course, before stepping down to the 10mg for 4 weeks. If symptoms persist the advice of a healthcare professional should be sought.

Nicotinell - TTS '10' patch

For individuals smoking 10 cigarettes or less per day – one patch (7mg) daily in 24 hours

Nicotinell - TTS '20' patch

For individuals smoking 20 cigarettes or less per day – one patch (14mg) daily in 24 hours.

Nicotinell – TTS '30' patch

For individuals smoking more than 20 cigarettes per day – one patch (21mg) daily in 24 hours

Use for 24 hours optimises the effect against morning cravings but in pregnant clients, it is recommended that the patch is removed before going to bed.

Withdraw treatment gradually reducing the dose every 3-4 weeks.

The treatment is designed normally to be used continuously for 3 months.

NiQuitin CQ

For individuals smoking 10 or more cigarettes daily: 21mg patch daily for 6 weeks, then 14mg patch daily for 2 weeks, then 7mg patch daily for 2 weeks, then review treatment

Individuals who experience persistent side effects with the 21mg patch should switch to the 14mg for the remainder of the 6 weeks followed by the 7mg patch for 2 weeks as above.

NiQuitin CQ

For individuals smoking less than 10 cigarettes per day:

14mg patch daily for 6 weeks, then

7mg patch daily for 2 weeks, then review treatment

Boots NicAssist - 24 Hour Patch (only available at Boots Pharmacy)

For individuals smoking 20 or more cigarettes a day, start with:

Step 1. 21mg patch for 3-4 weeks

Step 2. 14mg patch for 3-4 weeks

Step 3. 7mg patch for 3-4 weeks

For individuals smoking less than 20 cigarettes a day, start with:

Step 2. 14mg patch for 3-4 weeks

Step 3. 7mg patch for 3-4 weeks

Step 3. 7mg patch for 3-4 weeks

Specific side effects

Skin reactions (discontinue use if severe), nausea, faintness or headaches itchiness, cold, insomnia.

Clients experiencing excessive side-effects, which does not resolve within a few days, should change to a lower dose. If symptoms persist, to seek advice from a healthcare professional.

Specific advice to client

Exercise may increase absorption of nicotine and therefore side effects.

The patch should be applied once a day, normally in the morning, to a clean, dry, non-hairy area of skin on the hip, trunk or upper arm.

Allow several days before replacing the patch on a previously 'used' area. Place the patch in the palm of the hand and hold onto the skin for 10-20 seconds.

Patches should not be applied to broken or inflamed skin.

Once the patch is spent it should be folded in half and disposed of carefully.

Clients should not try to alter the dose of the patch by cutting it up.

Pregnant & Lactating Women:

The risk of using NRT to the foetus is lower than that expected with tobacco smoking, due to lower maximal plasma nicotine concentration. The decision to use NRT should be made as early on in the pregnancy as possible, and the aim should be to use NRT for only 2-3 months.

Using intermittent dose products, compared to patches, may minimize the amount of nicotine in the breast milk as the time between administrations of NRT and feeding can be more easily prolonged

Patches is recommended in adults and children over 12 years of age. It is also indicated in pregnant and lactating women making a quit attempt. Not recommended for use in children under 12 years of age and non-smokers.

E) QuickMist Mouth Spray

Dose and method	Nicorette QuickMist 1mg/spray mouthspray (Oromucosal spray)
of administration	Colourless to light yellow solution with a scent of peppermint. QuickMist Mouth Spray comes in Freshmint and Cool Berry flavours.
	Directions for use: If using Nicorette QuickMist for the first time or not used the spray for 2 days, it is important to first prime the spray pump.
	Priming: 1. Point the spray safely away from you and any other adults, children or pets that are near you. 2. Press the top of the QuickMist with your index finger 3 times until a fine spray
	appears.
	Note: priming reduces the number of sprays you may get
	Use 1 or 2 sprays when cigarettes normally would have been smoked or if cravings emerge. If after the first spray cravings are not controlled within a few minutes, a second spray should be used. If 2 sprays are required, future doses may be delivered as 2 consecutive sprays.
	Most smokers will require 1-2 sprays every 30 minutes to 1 hour. You may use up to 4 sprays per hour. Do not exceed 2 sprays per dosing episode and 64 sprays (4 sprays per hour over 16 hours) in any 24-hour period. Each mouth spray contains at least 150 sprays.
	Pack sizes: Single or Dual
Specific side effects	Dry mouth, burning lips, coughing, depressed mood, insomnia, irritability, frustration or anger; anxiety, difficulty concentrating, restlessness or impatience, palpitation, dizziness, increased appetite.
Specific advice to client	After priming, point the spray nozzle as close to the open mouth as possible. Press the top of the dispenser and release one spray into your mouth, avoiding

the lips. Do not inhale while spraying to avoid getting spray down your throat. For best results, do not swallow for a few seconds after spraying.
The client should not eat or drink when administering the oromucosal spray.
Care should be taken not to spray the eyes whilst administering the mouth spray.
Nicorette Quickmist is recommended in adults and children over 12 years of age. It is also indicated in pregnant and lactating making women a quit attempt. Not recommended for use in children under 12 years of age and non-smokers.

G) Sublingual tablet

Dose and method of administration	Nicorette / NicAssist Oral administration (sublingual) – 2mg.	
	For individuals smoking 20 cigarettes or less daily – 2mg per hour.	
	For clients who fail to stop smoking or have significant withdrawal symptoms consider increasing to 4mg per hour sublingually.	
	For individuals smoking more than 20 cigarettes a day – 4mg per hour.	
	Maximum dose: 80mg per day	
	Treatment should be continued for at least 3 months up to a maximum of 6 months. Dosage should be gradually reduced after 3 months.	
Specific side effects	Throat irritation, unpleasant taste, irritability/aggression, anxiety, restlessness, poor concentration, sleep disturbances.	
Specific advice to client	Tablets should be placed under the tongue and allowed to dissolve slowly.	
	Nicorette Microtab is recommended in adults and children over 12 years of age. It is also indicated in pregnant and lactating women making a quit attempt. Not recommended for use in children under 12 years of age and non-smokers.	

H) Nasal spray

Dose and method of administration	Nicorette / Boots NicAssist (Boots nasal spray only available in Boots Pharmacy)	
	Nasal administration (500 micrograms / metered spray).	
	Apply one spray into each nostril as required up to a maximum of twice per hour, over a 16 hour period (= maximum of 64 sprays daily) for a period of 8 weeks, then	
	Reduce dosage gradually over next 4 weeks achieving half the dose reduction required in the first 2 weeks, then	
	Continue to reduce dosage to 0 over next 2 weeks. Maximum period of treatment: 3 months	
Specific side effects	Nose and throat irritation, sneezing, watering eyes, dizziness, headache, nausea, vomiting, gastrointestinal discomfort, coughing.	

Specific advice to client	Advise on correct use of spray: 1) Remove the protective cap. 2) Prime Nicorette Nasal Spray by placing the nozzle between first and second finger with the thumb on the bottom of the bottle. Press several times firmly and quickly until a fine spray appears (up to 7-8 strokes). Important: Point the spray safely away when priming it. Do not prime it near
	children or pets. 3) Insert the spray tip into one nostril, pointing the top towards the back of the nose. Press firmly and quickly. Give a spray into the other nostril. 4) Put on the protective cap
	CAUTION – the nasal spray should not be used whilst driving or operating machinery as local effects can predispose to an accident.
	Nicorette Nasal Spray is recommended in adults and children over 12 years of age. It is also indicated in pregnant and lactating women making a quit attempt. Not recommended for use in children under 12 years of age and non-smokers

Source: Electronics Medicines Compendium (eMC) www.medicines.org.uk/emc

Combination Therapy

A combination therapy of NRT products has been shown to have a moderate advantage over just one product, as it also considered being cost effective. Advisors should therefore offer clients combination therapy whenever appropriate; those struggling or those with high level of nicotine dependency. However, we do not recommend that you dual prescribe any NRT products with Champix/Zyban.

Varenicline (Champix)

Champix (Varenicline) is a medicine that was first licensed in the UK in December 2006. It is designed to help smokers to stop smoking, which mimics the effect of nicotine on the body thereby reducing the urge to smoke and relieving withdrawal symptoms.

Champix interferes with the receptors in the brain that nicotine stimulates (the nicotine in cigarettes attaches to receptors in bran cells to stimulate part of the brain; this is how nicotine has its effect). What Champix does is partly stimulate the nicotine receptors, which mimics the effects of nicotine to reduce cravings and withdrawal effects when you stop smoking. However, at the same time it partially blocks the receptors and prevents nicotine from attaching to the receptors. This blocks or blunts the effect of nicotine in people who give in to temptation and have a cigarette.

Champix is orally taken, with the recommended dose:

Days 1 - 3	0.5mg once daily
Days 4 - 7	0.5mg twice daily
Say 8 - End of treatment	1mg twice daily

It is important that the client sets a date to stop smoking. Clients should be treated with Champix for 12 weeks. Clients who cannot tolerate adverse effects of Champix may have the dose lowered temporarily or permanently to 0.5mg twice daily.

For clients who have successfully stopped smoking at the end of 12 weeks, an additional course of 12 weeks treatment at 1mg twice daily maybe considered.

No data is available on the efficacy of an additional 12 weeks course of treatment for clients who do not succeed in stopping smoking during initial therapy or who relapse after treatment. However, it is reported that after discontinuation of Champix clients experienced irritability, urge to smoke, depression and/or insomnia. Thereby, consideration continuation should be considered and or the need for dose tapering.

Who is it not recommended to or to take with caution;

- Not recommended for the use in children or adolescents below 18 years of age due to insufficient data on safety and efficacy.
- Should not be used during pregnancy.
- It is unknown whether Champix is excreted in lactating women, however women should take in account the benefits of either breastfeeding or taking Champix.
- Clients with moderate renal impairment experiencing adverse effect to consider decrease dose to 1mg once daily.
- Clients with severe renal impairment are recommended to start at 0.5mg once daily for the first 3 days and increase to 1mg once daily.
- o Champix should be discontinued immediately if agitation, depressed mood or changes in behaviour that are of concern or if client develops suicidal ideation.
- The safety and efficacy in clients with serious psychiatric illness such as schizophrenia, bipolar disorder and major depressive disorder has not been established. Care should be taken with clients and they should be advised accordingly.

Side effects:

- Dysphonic anxiety, restlessness, agitation
- Depressed mood
- Insomnia
- Irritability
- Frustration anger
- Difficulty concentrating

- Increased appetite or weight gain
- Headache
- Nausea/vomiting
- · Stomach discomfort, constipation, diarrhoea, flatulence

Bupropion ((Zyban)

Zyban (Bupropion) is a medicine that was first developed to treat depression, and from 2000 is was certified to help smokers to stop smoking. Zyban alters the level of some chemicals in the brain (neurotransmitters(, which seems to relieve the withdrawal symptoms that you get when stop smoking (such as craving, anxiety, restlessness, headaches, irritability, hunger)

How to take Zyban:

- Clients should start by taking one tablet (150mg) each day for six days, then increase to one tablet twice a day
- Client should aim to stop smoking completely by setting a quit date within the first two weeks of treatment. this allows Zyban to build up in the body before stopping.
- Clients should be treated for 8 weeks

Zyban does not make smokers stop smoking, clients need determination to succeed and to break the smoking habit. Thereby a combination with behavioural assessment will increase the chance of successfully stopping smoking.

Who should not take Zyban or used with caution;

- Under the age of 18 years old
- Pregnant or breastfeeding women
- Clients that have suffered seizures or epilepsy
- · Have suffered from anorexia nervosa or bulimia nervosa
- Clients with known central nervous system tumour
- Clients with history of bipolar disorder
- Used with caution in elderly people and Clients with renal insufficiency
- All Clients should be assessed for predisposing risk factors, such as;
 - Alcohol abuse
 - History of head trauma
 - Diabetics

Side effects:

- Dizziness, light-headedness, headaches
- · Difficulty in sleeping/insomnia
- Drowsiness
- High blood pressure
- Depression
- Anxiety, agitation
- Poor concentrations
- Nausea, vomiting,
- Constipation, abdominal pains
- · Fever, rash, sweating

Appendix 2 – form B NRT/prescription claim form

PO number	Date
(Essential)	

Date	Client identifier (anonymous)	Intervention 1:1/Letter	NRT Product	Amount	Cost Price	Prescription charges
e.g. 01.04.21	Clients initials & DOB: e.g. MD – 04.06.62	Letter	Invisi Patch – 25mg	14	£18.75	
	TOTAL					
		Total (subtrac	ted from prescription	on charge)	£	

Appendix 3 Monitoring Form

Copies will be provided by Be Well Tameside

If you are unable to code, please state occupation, here:

MONITORING FORM 2021/22 Please tick to confirm client is aware of the following statement:-All olient data will be kept securely and in accordance with Galdigott guidelines. Information can only be passed on to different services within the NH3 if this contributes to the provision of effective care. Please FULLY COMPLETE this form. Do you concent to treatment and follow-up. Including future contact by the Be Well YE8 NO. Tameside to monitor your progress? 8ligned Date HOW DID YOU HEAR ABOUT THIS SERVICE GP which surgery: Friend or relative Pharmacy Health Visitor 🗖 District Nurse Practice Nurse Leaflet/poster in surgery TV/New spaper Advertisement 🗆 Other | please state: SMOKEFREE FAMILIES - 'TAKE 7 STEPS OUT' (Ifficied YES' to any, please scan and email to become side, with your name) Would you like a FREE □ Yes Would you like a FREE ■ Yes 8mokefree? support pack? 8afe & Well Check (Fire 8ervice) for Yes CLIENT DETAILS NH 8 No. First name 8 urname Telephone No 1 Date of birth Age Telephone No 2 Address Email ■ Male ■ Female ■ Non-binary Postcode: Prefer to self-describe: Which of the following options best describes how you □ Heteros exual/Straight □ Lesbian □ B sexual Gay in another way: think of yourself? Do you have a disability? □ Yes □ No Can we leave a message if you are out? | Yes | No Are you entitled to free prescriptions? USE OF UNLICENSED NICOTINE CONTAINING PRODUCT (NCP) Unilicenced NCP (e.g. e-digarette) tried: ■ Yes Using It at present | | Yes Do you ohew Tobacco/Baso П El No ETHNIC GROUP (please tick relevant group) ■ Mixed - White & Asian ☐ Black - Caribbean ■ White - British Any other mixed background Black - African □ Indian □ White Irich ■ Black - Other ☐ Pakistani Other white background Chinese Mixed - White & Black Caribbean □ Bangladeshi Other ethnic group Other Asian background ■ Not stated Mixed - White & Black African EMPLOYMENT STATUS Managerial/Professional is accounted, Full time student Medical practitioner, nurse, teacher, solicitor, Never worked/unemployed over a year Retired Intermediate is, call centre agent, secretary 8lok/disabled and unable to work Routine/Manual is. gardener, plumber, electrician, HGWvan driver bbourer, machine operative, postal worker. Home Carer is, looking after children, family or home Volunteer Full time carer

Adv	RVENTION Isor			8 ta	rt Date	· T					
Ven	ue .										
GP I	Name (If know	n)		Prac	doe Na	ime					
HE/	ULTH A 8 8 E 8 8	MENT (/	Nways complete first 3 q	pestions, the	remain	ing to be o	completed wh	henn	0005560	ry)	
	Do you hav own, state:	re any m	edical condition						Yes		No
		fer from :	he following conditions;								
COF	D 🗎 Yes	□ N	O ASTHMA P	es 🔲 N		HER RES	PIRATORY		Yes		No
	3. Do you tak	e any mi	dication? (Prescribed, b	ought over th	e count	ter or illicit	e.g.		Yes		No
	cannabis, o	coaine,	etc.)								
	s, state;										
			No Trying to conce the below questions.						Yes	dle or	11.000
			history of psychiatric illr				Onumpix or		Yes		No
ZYB			, , , , , , , , , , , , , , , , , , , ,								
			ment history of fits, seizu						Yes		No
			ment history of eating di: is with your Liver?	sorders 7 (e.g	. bulimi	a or anore:	da)		Yes		No No
			is with your Liver? fol or benzodiazepine w	thrirawal?					Yes		No
	hora area and a second		to or the water and the re-	· Linux					1 100		1100
	NITORING	0 /0 - 0	MOKING NS=NOT	O MANAGEMENTS	DMA -	- DID NO	TATTEMEN				
VIII.	Date of		Prescription	onor are	- Contract	CO	COMMEN	TB			
	session	/DMA	Product details	Strength	City	reading					
7											
2											
_											
3											
4											
5											
8											
7											
8											
Agn	eed		Date of last			ate of 4			CC	3 at 4	
	Quit Date tobacco use				W	reek gulf			Wes	eek .	
NICE definition of 4-week quit:											
NIC	E definition	of 4-w	eek quit:								

OCCOMPANIO SERVICES HEADTH INCOVERNMENT COMPANION SITTS CONTROLLED STREET CONTROL SERVICES HEADTH INCOMPANION SERVICES CONTROLLED SERVICES CONTROL

Appendix 4



Date:		NHS Foundation Trus
Re:	Client's Name	Be Well Tameside 51A Manchester Rd
	Address	Denton M34 2AF
		T 0404 740 0000
	Client's Date of Birth	Telephone: 0161 716 2000 Email: bewelltameside@nhs.net
	Advisor's Name	
	Contact Number	
	Venue	
	GP Practice	
Dear Doctor/Pharmacist		

The above named client is involved in a support programme with Be Well Tameside.

Please consider prescribing the following medication if appropriate for this client. We have discussed the advantages and disadvantages of all products available and believe the product indicated below is the most suitable.

Drug	Brand name	Product/ Form	Strength	Dose	Quantity
Nicotine					
Replacement					
Therapy(NRT)					
(Delete box if not					
required)					
Bupropion	Zyban	Tablets	150mg		
(Delete box if not					
required)					
Varenicline	Champix	Tablets	0.5mg/1mg	As directed	Starter pack x 25
(Delete box if not					tablets
<mark>required)</mark>			0.5mg		
			1mg		

For product information, please refer to the Summary Product Characteristics or contact us on the phone numbers above for further information.

	Quit date:
Yours faithfully	4 week quit achieved? (See NICE definition)
	Comments: i.e. FP10 to send to(GP or preferred pharmacy)
Health & Wellbeing Advisor	
	Are you entitled to free prescriptions? Yes/No
	Signature to confirm entitlement:

This message may contain confidential information. If you are not the intended recipient please inform the sender that you have received the message in error before deleting it. Thank you for your co-operation



Appendix 5a

Guidance for Stop Smoking Advisors using CO monitors based on Health Protection Agency Advice

Taking a Client CO Reading

When a client attends their stop smoking appointments, you should check that people are in good health/feeling well – if so, carry on with your stop smoking advice and follow the guidelines for taking a CO reading (most people won't come if they are ill).

In the unlikely event that a client arrives and is ill the stop smoking advisor needs to check for the possibility of swine flu from a person's symptoms to decide whether or not to continue with the validation. This will be rare as most clients will not attend if they are feeling unwell (leave 7 days for alternate appointment).

On <u>all visits</u> whether or not the person reports any illness, always follow basic infection avoidance hygiene.

CO monitors and related consumables

- Any gels containing alcohol used on the hands must be dry before touching anything. Staff
 and clients MUST NOT handle the CO monitor until their hands are dry as this can cause
 incorrect carbon monoxide readings.
- The mouthpiece MUST ONLY be used once and should be disposed of by the client (they can remove the mouthpiece themselves). Individually sealed mouthpieces are available for peace of mind.
- The CO monitor should be cleaned between visits with a non-alcoholic wipe. DO NOT use an alcoholic wipe or sanitizer gel to clean the CO monitor.
- Bedfont Scientific Ltd recommends changing the D-Piece/T-Piece monthly or depending on its usage or unless visibly soiled, but if there is any doubt CHANGE IMMEDIATELY.

COVID-19 compliance

Pharmacies will be required to ensure that measures are in place so that all service delivery is COVID-19 secure. If face-to-face provision is considered alongside local coronavirus restrictions, with the thought of offering CO monitoring, staff should ensure that they follow the manufacturer's guidance on the safe handling/cleaning of monitors and in addition to the COVID-19 specific guidance. (For more information: Face to face support and CO monitoring guide (ncsct.co.uk)

More information available at:

- Bedfont www.bedfont.com/coronavirus
- o http://www.hpa.org.uk/
- https://www.bedfont.com/file/2614-LAB693%20ToxCO%20user%20manual%20issue%204.pdf

Appendix 5b

Carbon Monoxide Monitor Protocol (Infection Control)

Disposable mouth-tubes

Single-use only

Plastic adaptor; T-piece/D-piece

The adaptors contain a one-way valve that prevents inhalation from the monitor. Changing adaptors depends on manufacturers' guidance:

- o Micromedical: the adaptor should be discarded and replaced every six months
- o **Bedfont (piCO):** adaptor should be discarded and replaced monthly
- BMC-2000: the adaptor should be changed quarterly, unless usage is heavy, in which case change monthly

Usage;

- Less than 50 uses per month: change quarterly
- o Between 51 and 200 uses per month: change bi-monthly
- More than 200 uses per month: change monthly

Contact Be Well Tameside for supplies of adaptors and disposable mouth-tubes.

Cleaning

The monitors should be wiped down using non-alcoholic wipes, at the end of every session.

Calibrating

Some monitors should be calibrated every six months. Contact Be Well Tameside to arrange calibration.

Be Well Tameside 51A Manchester Road Acre House Denton M34 2AF

Tel: 0161 716 2000

Email: bewelltameside@nhs.net