

Our Trust

smokefree



Why do people smoke?

Because they are addicted.

Smoking is a *chronic relapsing long term condition*, usually starts in childhood and is familial.

Nicotine is the addictive product within cigarettes.



Impact of smoking in County Durham

	County Durham
Smoking prevalence (APS, 2017)	14.3% 60,084 adult smokers
Smoking at time of delivery (APS, 2017)	16.7% 867 women
Annual cost of smoking to the local NHS (ASH Ready Reckoner, 2018)	£26.5m
Hospital admissions for smoking related conditions (ASH Ready Reckoner, 2018)	6,226 hospital admissions £7.6m
Cost of treating smoking related illness via outpatient and primary care services (ASH Ready Reckoner, 2018)	£18.9m

Smokefree NHS is strategically important

- NICE Guidance PH48
- Five Year Forward View
- National Tobacco Plan
- PHE national priority
- CQUIN
- Prevention Board - #1 priority
- RCP Hiding in Plain Sight Report
- North East Vision 5% by 2025

PHE Tobacco Control Delivery Plan

- Focus on NHS sustainability – emphasis on smokers in the healthcare system.
- As smokers experience a greater incidence of poor health and disease, the health system is already engaging regularly with them.
- Maximise these opportunities and make every contact count.

Every front-line professional discusses smoking with their patients

Everyone understands there is no smoking anywhere on NHS property

Every smoker is offered stop smoking support on site or referral to local services



Public Health
England

Our approach

- Anti-smoking not anti-smoker
- Smoking is a relapsing long term condition not a lifestyle choice – treatment of tobacco dependency
- Brief advice: ask / advise / act
- Review of nicotine management approach
- Review approach to e-cigarettes – do we want smokers to leave the premises to smoke or stay on the premises and quit?
- Workforce development
- Supported by communication approach

The number of referrals to local stop smoking services from secondary care is low

Does the Trust need to change how it thinks about smoking?

Smoking is tobacco dependency

Smoking cessation is *the* treatment for tobacco dependence

Smoking cessation as treatment has a very strong evidence base

Our priorities

- Board level leaders identified.
- Chair, CEO and Medical Director sign ASH Smokefree NHS Pledge.
- Appointment of NHS Smokefree Lead.
- Co-ordination of Smokefree Champions group.
- Review and revision of the Trust's Smokefree Policy.
- Agreement on approach to Treating Tobacco Dependency (both for temporary abstinence and to support a quit attempt).
- Implementation of communication approach.
- Improving CQUIN performance.

Preventing ill health by risky behaviours - training via brief advice workbook:

- What is a brief intervention – Ask, Advise, Act
- The cycle of change
- Health risks of smoking / what's in a cigarette
- E-cigarettes – evidence review
- Benefits of and barriers to quitting
- Symptoms of nicotine withdrawal
- Your role - very brief advice / raising the issue
- Referring a patient to the local Stop Smoking Service.

705 registered nurses were identified as in scope for the training. At the end of June 2018, the **majority (496 - 70%)** had successfully completed the workbook. In addition to this a **further 374** (mainly HCAs and registered staff in other areas) had also completed the workbooks.

Preventing ill health by risky behaviours in acute hospitals: tobacco

Indicator	2018/19 Q1	2018/19 Q2
Screening (%age of unique adult patients screened for smoking and result recorded)	81.4%	78.3%
Brief advice (%age of unique patients who smoke and are given very brief advice)	55.6%	40.7%
Referral and medication offer (%age of unique patients who are smokers and are offered referral to stop smoking services and offered stop smoking medication)	55.6%	47.8%

Proposed Communication Approach

- Integrate CDDFT campaign with Northumbria to create wide reaching single brand – strengthened reach and impact
- Will still include localised trust identity and tailored messages
- Utilising *Change is in the Air* artwork and engagement tools
- Collateral can include:
 - Point of sale (trees, internal/external floor graphics, banners, bollard covers, posters, leaflets, car park notices)
 - Training resource, staff engagement, patient information booklets, communication plan, FAQs.

smokefree



A4 Door Posters



Feature floor vinyl



A5 Leaflet

A5 Leaflet holder



All these will add together as part of our commitment to being smokefree for every strongly shared moment in our new health places



Any Questions?