



British
Thoracic
Society

Webinar Series 2 – Session 1

How do I quickly identify patients that smoke?

Thursday 19th May 2022

Speakers – Webinar session 1, 19th May 2022

Innovative ways to speed up access to treatment - what does a gold standard IT system look like?

- *Heidi Croucher - Dorset ICS Treating Tobacco Dependency Programme Manager*
- *Michaela Osborne, IT Project Support Officer*

Getting to patients quickly on admission - how to use the live data effectively to get to patients as they are admitted

- *Lisa Irving - Public Health Strategy & Programme Manager, Northumbria Healthcare NHS Foundation Trust*



Innovative ways to speed up access to treatment!

What does a gold standard IT system look like?

BTS Webinar 19.05.22

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Setting the scene.....What is eNA ?



- Electronic Nursing Assessments (eNA)
- Bespoke In house development that went live in 2015
- Single point of access for recording and storing nursing assessments
- Alerts clinicians when assessments are due
- Calculates scores and levels of risk (e.g. Fagerstrom)
- Provides appropriate clinical guidance based on the information that has been entered into the assessments
- Assessments completed on ipads at the patient bedside

The screenshot displays the eNA system interface. At the top, there are tabs for various assessment types: All, MUST, Hm, Alcohol Audit, Fast, Smoking, COVID Swabbing, CWA, Waterflow, Dementia, Mobility and Frailty, Falls and Bed rails, YTE, and Infection Control. Below these, there are filters for Consultant, A-Z, Bay, Beach, Score, and Risk. The main table lists patient assessments with columns for PMI, Cons, TJS, DEL, Bed, and Risk. A detailed view of a 'Smoking' assessment is shown, including fields for Hospital ID, NHS Number, Consultant, Adm. Date, Transfer Date, Ward, Forename, Surname, Sex, DOB, Height, and Weight. The 'Smoking' assessment shows an assessed date of 03/03/2021 10:40, a score of 0, and a next due date of 03/03/2021 10:40. The interface also includes buttons for 'Delete', 'History', 'Add', and 'Actions'.



Initial discussion and requirements for eNA smoking assessment



Requirements given to developers and development begins



Initial first pass testing



Assessment reviewed and further changes requested



Pilot ward information pack



Ward Training sessions



Training video



User guide



Pharmacy sign off



Policy and SOP



Pilot feedback reviewed and evaluated. Further changes requested



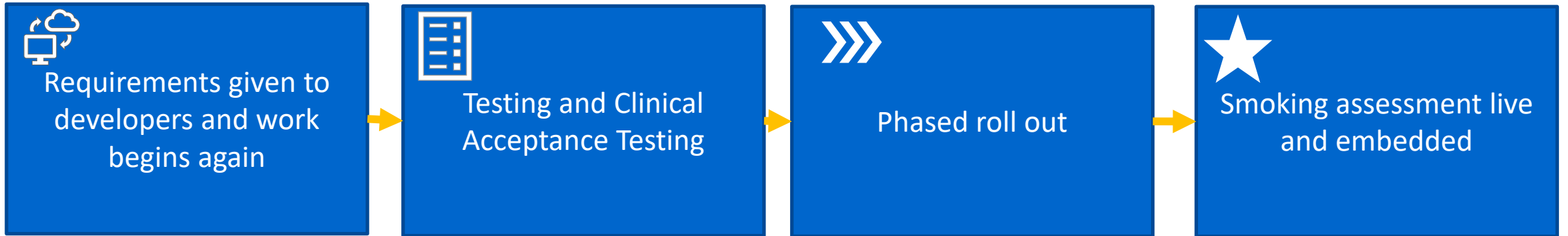
Pilot AMU to stress test



Staff Education and training



Changes implemented Testing and Clinical Acceptance Testing



Some early drafts

NEW ASSESSMENT/OBSERVATION REQUEST

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Do you smoke?

Yes (continue with assessment)

No, it is advised that you still obtain a CO reading would you like to do that now?

Yes (jump to CO section)

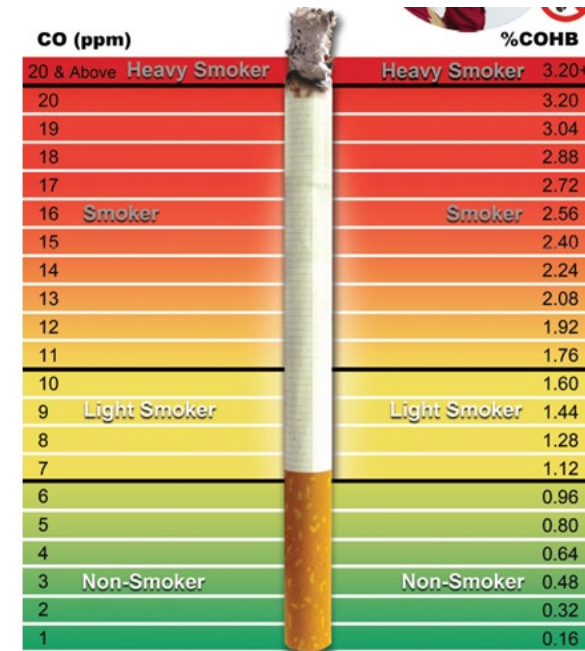
No (end assessment and become compliant)

Ex smoker – using Nicotine replacement, it is advised that you still obtain a CO reading would you like to do that now?

Yes (jump to CO section)

No (end assessment and become compliant)



Ex-smoker|– NOT using Nicotine replacement, it is advised that you still obtain a CO reading would you like to do that now? (end assessment and become compliant)



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www.mdd.org.uk email: sales@mdd.org.uk



PLEASE TICK (✓) ONE BOX FOR EACH QUESTION		
How soon after waking do you smoke your first cigarette?	Within 5 minutes	<input type="checkbox"/> 3
	5-30 minutes	<input type="checkbox"/> 2
	31-60 minutes	<input type="checkbox"/> 1
Do you find it difficult to refrain from smoking in places where it is forbidden? e.g. Church, Library, etc.	Yes	<input type="checkbox"/> 1
	No	<input type="checkbox"/> 0
Which cigarette would you hate to give up?	The first in the morning	<input type="checkbox"/> 1
	Any other	<input type="checkbox"/> 0
How many cigarettes a day do you smoke?	10 or less	<input type="checkbox"/> 0
	11 – 20	<input type="checkbox"/> 1
	21 – 30	<input type="checkbox"/> 2
	31 or more	<input type="checkbox"/> 3
Do you smoke more frequently in the morning?	Yes	<input type="checkbox"/> 1
	No	<input type="checkbox"/> 0
Do you smoke even if you are sick in bed most of the day?	Yes	<input type="checkbox"/> 1
	No	<input type="checkbox"/> 0
Total Score		
SCORE	1- 2 = low dependence	5 - 7 = moderate dependence
	3-4 = low to mod dependence	8 + = high dependence

 Challenges	 Enablers
CoVid 19	Great communication and working relationships
Priority IT projects	Clinical staff already familiar with eNA
Business as Usual	Built in house – ability to make most changes easily
Introducing a new assessment - Change	Onsite support during go live
Merging of Trusts	Quick response time for urgent changes/tweaks



Smoking Assessment

Surname:

USERS

PREVIOUS

Admin User
Administrative User

PIN

Login to eNA by
searching your
surname and
selecting your name
from the drop-down
box

Enter your PIN

RB Ward 03

All	MUST	HaN	Alcohol Audit	Foot	Smoking	COVID Swabbing
Waterlow	Dementia	Mobility and Frailty	Falls and Bed rails	VTE	ED	Infection Control
Consultant	A-Z	Bay	Breach	Risk	Score	

PMI: 9701491	c2a4957	Bed:		-846 d	Smoking
Cons:SND	45b33c233	Bay: 0		12:55	
PMI: 10626183	c8d724c	Bed:	CVD 19	-844 d	Smoking
Cons:SND	342d2	Bay: 0		23:35	
PMI: 5103907	8fa23344	Bed:2*		-816 d	Smoking
Cons:HBH	de27a9c8	Bay: 3*		02:30	
PMI: 4756370	3ae55595	Bed:2*		-796 d	Smoking
Cons:GLJP	44c3184e	Bay: 2*		11:37	
PMI: 9116553	dfa6ee1	Bed:2*		-785 d	Smoking
Cons:DEL	d2404	Bay: 2*		17:06	
PMI: 9714717	6d4fe	Bed:3*		-782 d	Smoking
Cons:TJS	68cd22f	Bay: 3*		02:53	
PMI: 4658815	38008ae	Bed:2*		-775 d	Smoking
Cons:TJS	9b5ed53	Bay: 2*		14:26	
PMI: 1567377	f3e73	Bed:		-774 d	Smoking
Cons:SWHI	c4bb09	Bay: 0		09:23	
PMI: 5036140	5766183	Bed:		-774 d	Smoking
Cons:HBH	bc448818	Bay: 0		06:38	
PMI: 6660903	b3e852	Bed:		-772 d	Smoking
Cons:CJH	c3231d	Bay: 0		23:51	
PMI: 2077745	db2690cd	Bed:		-772 d	Smoking
Cons:GLJP	5d625	Bay: 0		00:20	

Once eNA has launched the ward list will display

Select the smoking tab at the top of the screen

RB Ward 03

Hospital ID: 9714717 Forename: 6d4fe
 NHS Number: 7854832 Surname: 68cd22f
 Consultant: TJS Sex: Female
 Adm. Date: 02/01/2019 04:58 DOB: 16/10/1994
 Transfer Date: 02/01/2019 23:50 Height:
 Ward: RB03 | Bay: 3* | Bed: 3* Weight

Monitoring

Smoking

Assessed:

Next Due: 02/01/2019 10:58

Delete Actions
History Add

PMI: 9714717	6d4fe	Bed: 3*		-782 d	Smoking
Cons: TJS	68cd22f	Bay: 3*		02:53	
PMI: 4658815	38008ae	Bed: 2*		-775 d	Smoking
Cons: TJS	9b5ed53	Bay: 2*		14:26	
PMI: 1567377	f3e73	Bed:		-774 d	Smoking
Cons: SWHI	c4bb09	Bay: 0		09:23	
PMI: 5036140	5766183	Bed:		-774 d	Smoking
Cons: HBH	bc448818	Bay: 0		06:38	

Launch the smoking assessment by selecting a patient on the ward list

Press 'add' from within the patient bubble

Smoking Assessment

Smoking

It is advised that all patients admitted to hospital complete a carbon monoxide test. Would the patient like to do this now? ⓘ

No Yes Not clinically appropriate for this patient

Not clinically appropriate for this patient at this time

CO machine not available at this time

N/A This clinical area does not have access to CO machine

BP_S_0

Jump To

The first screen to launch within the assessment is Carbon Monoxide (CO) testing

Select one of the options to proceed in the assessment

Smoking Assessment

Smoking

It is advised that all patients admitted to hospital complete a carbon monoxide test. Would the patient like to do this now? ⓘ

Carbon Monoxide is a poisonous gas that you can't see or smell but it is dangerous to you and your family's health. Exposure to CO reduces oxygen levels in your body.

Carbon Monoxide screening is a quick and simple breathe test and will show if your level of exposure to carbon monoxide is low or whether you have had some recent exposure. Causes of high carbon monoxide readings include:

- Cigarettes
- Faulty gas appliances
- Industrial Chemicals
- Pollution
- Lactose Intolerance
- Shisha Pipe

No

Yes

Not clinically appropriate for this patient

Not clinically appropriate for this patient at this time

CO machine not available at this time

N/A This clinical area does not have access to CO machine

BP_S_0

Jump To

Press the green i icon to display further information about CO and CO testing

Smoking Assessment

Smoking

	CO (ppm)	%COHB	
Heavy Smoker	20 & Above	3.20+	Heavy Smoker
	20	3.20	
	19	3.04	
	18	2.88	
	17	2.72	
Smoker	16	2.56	Smoker
	15	2.40	
	14	2.24	
	13	2.08	
	12	1.92	
	11	1.76	
	10	1.60	
Light Smoker	9	1.44	Light Smoker
	8	1.28	
	7	1.12	
	6	0.96	
	5	0.80	
	4	0.64	
Non-Smoker	3	0.48	Non-Smoker
	2	0.32	
	1	0.16	

7

BackNext

If **YES** for CO testing the CO test slider will display

Record the CO test result by moving the slider to the appropriate value

Smoking Assessment

Smoking

Do you smoke?

Yes

No

Ex-smoker using nicotine replacement or Champix

Ex-smoker Not using nicotine replacement or Champix

Vaping

BP_S_2

Back

Jump To

Select an option on the 'Do you smoke?' screen

The assessment will then progress according to the chosen selection

The following screens provide an overview on how the assessment progresses when **YES** is selected for 'Do you smoke?'

Smoking Assessment

Smoking

Do you smoke?

Yes No Ex-smoker using nicotine replacement or Champix

Ex-smoker Not using nicotine replacement or Champix Vaping

BP_S_2

Back

Jump To

Do you smoke? : Option selected = YES

Smoking Assessment

Smoking

How soon after you wake up do you smoke your first cigarette?

Within 5 minutes 6-30 minutes 31-60 minutes

More than 60 minutes

Back

BP_S_5

If you have chosen **YES** for smoking, the assessment launches the Fagerström

The smoking assessment automatically progresses once a selection is made for each question

Do you smoke? : Option selected = YES

14:08 Wed 5 May Not Charging

< Abandon Logout

Hospital ID: 5036140 Forename: 5766183
NHS Number: 1625465 Surname: bc448818
Consultant: HBH Sex: Male
Adm. Date: 10/01/2019 01:13 Height:
DOB: 23/10/1949 Weight:

Smoking

Score: 7
Score of 5-7

A patient who scores 5-7 would be considered to be **moderately dependent** on nicotine and could be offered **combination therapy** of patches, inhaler or gum. Varenicline (Champix) initiation dose could be offered. Please check treatment recommendation chart.

NRT Recommendation Chart:

Dependence Level	Combination Nicotine Replacement Therapy and Varenicline (Champix) dosage	Recommendation of medication acknowledged and action taken
High	Patches 21mg/24hr (1 patch a day) with Gum 2mg (Up to 15 pieces a day) or Inhalator 15mg (Up to 6 Cartridges per day) or alternatively Varenicline (Champix ®) tablets 0.5mg (1mg initiation dose)	<input type="checkbox"/>
Moderate	Patches 21mg/24hr (1 patch a day) with Gum 2mg (Up to 15 pieces a day) or Inhalator 15mg (Up to 6 Cartridges per day) or alternatively Varenicline (Champix ®) tablets 0.5mg (1mg initiation dose)	<input type="checkbox"/>
Low to Moderate	Patches 14mg/24hr - 1 patch a day with Gum 2mg (Up to 15 pieces a day) or Inhalator 15mg (Up to 6 Cartridges per day)	<input type="checkbox"/>

Jump To

Once the Fagerström has been completed the next screen to launch is the NRT recommendation chart

The Fagerström score and corresponding nicotine dependency will display at the top of the chart

Do you smoke? : Option selected = YES

14:08 Wed 5 May Not Charging

< Abandon Logout

Hospital ID: 5036140 Forename: 5766183
NHS Number: 1625465 Surname: bc448818
Consultant: HBH Sex: Male
Adm. Date: 10/01/2019 01:13 Height:
DOB: 23/10/1949 Weight:

Smoking

Score: 7
Score of 5-7

A patient who scores 5-7 would be considered to be **moderately dependent** on nicotine and could be offered **combination therapy** of patches, inhaler or gum. Varenicline (Champix) initiation dose could be offered. Please check treatment recommendation chart.

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Moderate	Patches 21mg/24hr (1 patch a day) with Gum 2mg (Up to 15 pieces a day) or Inhalator 15mg (Up to 6 Cartridges per day) or alternatively Varenicline (Champix ®) tablets 0.5mg (1mg initiation dose)	<input checked="" type="checkbox"/>
Low to Moderate	Patches 14mg/24hr - 1 patch a day with Gum 2mg (Up to 15 pieces a day) or Inhalator 15mg (Up to 6 Cartridges per day)	<input type="checkbox"/>

Jump To

The recommended Combined NRT and Varenicline dosage according to the nicotine dependency will highlight green in the chart

Select the checkbox to acknowledge the recommendation and that action will be taken

Do you smoke? : Option selected = YES

or alternatively
Varenicline (Champix ®) tablets 0.5mg (1mg initiation dose)

Moderate	Patches 21mg/24hr (1 patch a day) with Gum 2mg (Up to 15 pieces a day) or Inhalator 15mg (Up to 6 Cartridges per day) or alternatively Varenicline (Champix ®) tablets 0.5mg (1mg initiation dose)	<input type="checkbox"/>
Low to Moderate	Patches 14mg/24hr - 1 patch a day with Gum 2mg (Up to 15 pieces a day) or Inhalator 15mg (Up to 6 Cartridges per day) or alternatively Varenicline (Champix ®) tablets 0.5mg (1mg initiation dose)	<input type="checkbox"/>
Low	Patches 7mg/24hr - 1 patch a day with Gum 2mg (Up to 15 pieces a day) or Inhalator 15mg (Up to 6 Cartridges per day) or alternatively Varenicline (Champix ®) tablets 0.5mg (1mg initiation dose)	<input type="checkbox"/>
Patient Declined	Patient Declined - NRT Not Issued	<input type="checkbox"/>
NRT Not Issued	Reasons documented in notes	<input type="checkbox"/>

Dosage and Method Of Administration Of NRT Products

Back Next

If you require further information on the dosages and method of administration of NRT products select the button at the bottom of the screen

Do you smoke? : Option selected = YES

Dosage and Method Of Administration Of NRT Products

☒ Nicorette® Gum ☐ Nicorette® Inhalator ☐ Nicorette® Patches
☐ Varenicline (Champix ®)

Nicorette® Gum

Dose and method of administration:
Nicorette® – 2mg gum
Oral administration.
One 2mg piece chewed using the 'chew-rest-chew' technique on the urge to smoke.
Maximum 15 pieces per day of Nicorette®.

Specific side effects:
Throat irritation, increased salivation, hiccups. Gum may stick to and in rare cases damage dentures and dental appliances.

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. After this time the gum will have lost its strength and should be disposed of carefully.
Concomitant use of acidic beverages such as coffee or soda may interfere with the buccal absorption of nicotine. Acidic beverages should be avoided for 15 minutes prior to chewing the gum.

Documentation:
The medical prescriber MUST document on, and sign, the patient drug chart indicating dose and frequency.

Associated Documents:
• British National Formulary (BNF) (on-line via medicines complete)
• Please refer to current BNF and SPC for full details: <http://www.medicines.org.uk/emc>

References:
• British National Formulary (BNF) via www.medicinescomplete.com. BMJ Group. London.
Accessed on June 2019
• National Institute for Health and Clinical Excellence (2019)

You can view information for each medication by clicking the tabs at the top of the page

Do you smoke? : Option selected = YES

	or alternatively Varenicline (Champix ®) tablets 0.5mg (1mg initiation dose)	
Moderate	Patches 21mg/24hr (1 patch a day) with Gum 2mg (Up to 15 pieces a day) or Inhalator 15mg (Up to 6 Cartridges per day) or alternatively Varenicline (Champix ®) tablets 0.5mg (1mg initiation dose)	<input type="checkbox"/>
Low to Moderate	Patches 14mg/24hr - 1 patch a day with Gum 2mg (Up to 15 pieces a day) or Inhalator 15mg (Up to 6 Cartridges per day) or alternatively Varenicline (Champix ®) tablets 0.5mg (1mg initiation dose)	<input type="checkbox"/>
Low	Patches 7mg/24hr - 1 patch a day with Gum 2mg (Up to 15 pieces a day) or Inhalator 15mg (Up to 6 Cartridges per day) or alternatively Varenicline (Champix ®) tablets 0.5mg (1mg initiation dose)	<input type="checkbox"/>
Patient Declined	Patient Declined - NRT Not Issued	<input checked="" type="checkbox"/>
NRT Not Issued	Reasons documented in notes	<input type="checkbox"/>

Dosage and Method Of Administration Of NRT Products

Back Next

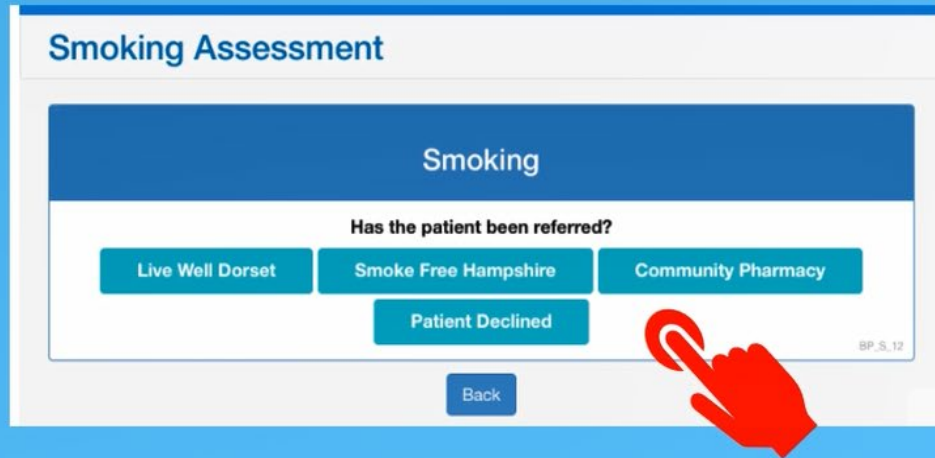
This is not the recommended NRT/varenicline dosage.
If selected please document the reason in the patient notes.

It is possible to select another option other than the recommended NRT dosage

There are also options to select 'not issued' or 'patient declined'

However, if another option is selected an alert message will display to highlight that you have chosen an option other than the recommended dosage. The reason should be documented in the notes

Do you smoke? : Option selected = **YES**



The image shows a screenshot of a 'Smoking Assessment' form. At the top, it says 'Smoking Assessment'. Below that is a blue header with the word 'Smoking'. Underneath is a section titled 'Has the patient been referred?' with four buttons: 'Live Well Dorset', 'Smoke Free Hampshire', 'Community Pharmacy', and 'Patient Declined'. A red hand icon is pointing at the 'Patient Declined' button. At the bottom of the form is a 'Back' button. The text 'BP_S_12' is visible in the bottom right corner of the form area.

Once the NRT recommendation chart has been completed the 'Referral' screen will launch

Select one of the options

Do you smoke? : Option selected = YES

Summary

Please review your answers here.

Smoking Advice

- **ADVISE:** Provide information of the impact of tobacco on care and treatment, therefore the need to abstain. Identify this as an opportunity
- **ACT:** Advise the patient that there are options to treat the nicotine addiction with pharmacotherapy. Actions should be taken to ensure they are issued/prescribed Varenicline (Champix ®) or NRT for the duration of inpatient stay.
- **REFER:** Initiate a referral to Live Well Dorset via Contact my patient tool or call 08008401628.
- **DISCHARGE:** Ensure the patient is discharged from hospital with:
 - 1) Pharmacotherapy supply for 2 weeks
 - 2) Follow up appointment is made with smokestop pharmacist/GP for ongoing pharmacotherapy and CO testing
 - 3) Confirm Live Well Dorset has made contact with a plan.

If you are happy that the answers are correct then click the 'Finish' button at the bottom of the page.

Question and answer review

Please check your answers below before submitting

- It is advised that all patients admitted to hospital complete a carbon monoxide test. Would the patient like to do this now?
 - No
- Do you smoke? - Yes
- How soon after you wake up do you smoke your first cigarette? - 6-30 minutes
- Do you find it difficult to stop smoking in no-smoking areas? - Yes
- Which cigarette would you hate most to give up? - The first in the morning
- How many cigarettes per day do you usually smoke? - 11-20
- Do you smoke more frequently in the first hours after waking than during the rest of the day? - Yes
- Do you smoke if you are so ill that you are in bed most of the day? - Yes
- NRT recommendation selected - NRT Not Issued - Patient Declined
- Has the patient been referred? - Live Well Dorset
- Dependence level - Moderate
- Fagerstrom score - 7

BackFinish

Once the referral screen has been completed the smoking assessment ends and displays the summary

Advice and Actions are shown at the top of the screen

The Question and Answer review is at the bottom of the screen.

Summary

Please review your answers here.

Smoking Advice

- **ADVISE:** Provide information of the impact of tobacco on care and treatment, therefore the need to abstain. Identify this as an opportunity
- **ACT:** Advise the patient that there are options to treat the nicotine addiction with pharmacotherapy. Actions should be taken to ensure they are issued/prescribed Varenicline (Champix ®) or NRT for the duration of inpatient stay.
- **REFER:** Initiate a referral to Live Well Dorset via Contact my patient tool or call 08008401628.
- **DISCHARGE:** Ensure the patient is discharged from hospital with:
 - 1) Pharmacotherapy supply for 2 weeks
 - 2) Follow up appointment is made with smokestop pharmacist/GP for ongoing pharmacotherapy and CO testing
 - 3) Confirm Live Well Dorset has made contact with a plan.

If you are happy that the answers are correct then click the 'Finish' button at the bottom of the page.

Question and answer review

Please check your answers below before submitting

- It is advised that all patients admitted to hospital complete a carbon monoxide test. Would the patient like to do this now?
 - No
- Do you smoke? - Yes
- How soon after you wake up do you smoke your first cigarette? - 6-30 minutes
- Do you find it difficult to stop smoking in no-smoking areas? - Yes
- Which cigarette would you hate most to give up? - The first in the morning
- How many cigarettes per day do you usually smoke? - 11-20
- Do you smoke more frequently in the first hours after waking than during the rest of the day? - Yes
- Do you smoke if you are so ill that you are in bed most of the day? - Yes
- NRT recommendation selected - NRT Not Issued - Patient Declined
- Has the patient been referred? - Live Well Dorset
- Dependence level - Moderate
- Fagerstrom score - 7

Jump To

➡ Back Finish ⬅

Once you are happy that the correct information has been entered press the green 'Finish' button to submit the assessment

If you identify that incorrect information has been added you can select the blue 'Back' button to go through the assessment to amend if necessary

The following screens provide an overview on how the assessment progresses when **VAPING** is selected for 'Do you smoke?'

Smoking Assessment

Smoking

Do you smoke?

Yes No Ex-smoker using nicotine replacement or Champix

Ex-smoker Not using nicotine replacement or Champix **Vaping**

BP_S_2

Back

Jump To

Do you smoke? : Option selected = **Vaping**

Smoking Assessment

Smoking

Score:

NRT Recommendation Chart:

Dependence Level	Combination Nicotine Replacement Therapy Dosage	Recommendation of medication acknowledged and action taken
High 18mg e-fluid	Patches 21mg/24hr with Gum 2mg or Inhalator 15mg (Up to 6 Cartridges per day)	<input type="checkbox"/>
Low to Moderate 12-14mg e-fluid	Patches 14mg/24hr with Gum 2mg or Inhalator 15mg (Up to 6 Cartridges per day)	<input type="checkbox"/>
Low 3-6mg e-fluid	Patches 7mg/24hr with Gum 2mg or Inhalator 15mg (Up to 6 Cartridges per day)	<input type="checkbox"/>
NRT Not Issued	Reasons documented in notes	<input type="checkbox"/>

Dosage and Method Of Administration Of NRT Products

Back Next

Once vaping has been selected, the Vaping NRT recommendation chart will launch

As a Fagerström is not completed for Vaping, the NRT recommendation should be based on the e-fluid that the patient usually vapes

CO reading of 6+

Smoking Assessment

Summary
Please review your answers here.

Patient scored 6+ on CO Test and does not smoke - tap for guidance

If you are happy that the answers are correct then click the 'Finish' button at the bottom of the page.

Question and answer review
Please check your answers below before submitting

- It is advised that all patients admitted to hospital complete a carbon monoxide test. Would the patient like to do this now? - Yes
- CO reading - 13 ppm
- Do you smoke? - Vaping
- NRT Issued - NRT Not Issued - Reasons documented in notes
- Dependence level - NRT Not Issued

Back Finish

If a patient has been recorded as a non smoker and has CO reading of 6+, a further button appears on the summary screen

CO reading of 6+

My patient is a Non Smoker with CO reading of 6+

CO readings of 6-10 ppm

Indicates poor air quality or passive smoke

- Check if anyone else in the household smokes. If they are present and consent, refer to Live Well Dorset via the contact my patient tool. If consent is not given then offer the Live Well Dorset Card or information sheet.

CO readings of 11+ ppm

Indicates exposure to CO through faulty gas appliances

- Patient must call 0800 300 363 in case they have a faulty gas appliance at home.
- Check if anyone else in the household smokes. If they are present and consent, refer to Live Well Dorset via the contact my patient tool. If consent is not given then offer the Live Well Dorset Card or information sheet.

If the patient is symptomatic of CO poisoning then consult a doctor

Signs and symptoms of CO poisoning include:

- Headaches
- Nausea
- Breathlessness
- Dizziness
- Collapse
- Unconsciousness

Ok

If a patient has been recorded as a non smoker and has CO reading of 6+, a further button appears on the summary screen

Select this button and further advise and guidance will launch

Ward list

Monitoring

Smoking

Assessed: 03/03/2021 10:40 Score: 0

Next Due: Risk: 0

Delete History Add

PMI: 9347265 dddd1b4 Bed: 0

Cons: GLJP 7232086 Bay: 0

Once a smoking assessment has been submitted the patient will turn green on the ward list


The assessment only needs to be completed once.

However, it is always possible to complete another assessment if required by selecting 'Add'

Ward List : Carbon Monoxide

Smoking Assessment

Smoking

It is advised that all patients admitted to hospital complete a carbon monoxide test. Would the patient like to do this now? 

No Yes Not clinically appropriate for this patient

Not clinically appropriate for this patient at this time

CO machine not available at this time

N/A This clinical area does not have access to CO machine

BP_S.0

Jump To

If **‘Not clinically appropriate for this patient at this time’** or **‘CO machine not available at this time’** are selected on the CO testing screen, the patient will display as amber on the ward list

PMI: 5091695	91831	Bed:		11:59	Smoking
Cons:DFJ	dc566e8	Bay:			0

PMI: 1244347	5a34a	Bed:SR4*		-00:29	
Cons:CBA	13c950b4d	Bay: SR4*			

After 12 hours the patient will turn red on the ward list until a CO reading is recorded

Assessment History



Monitoring

Smoking

Assessed: 03/03/2021 10:40 Score: 0

Next Due: Risk: 0

PMI: 9347265 dddd1b4 Bed: 0

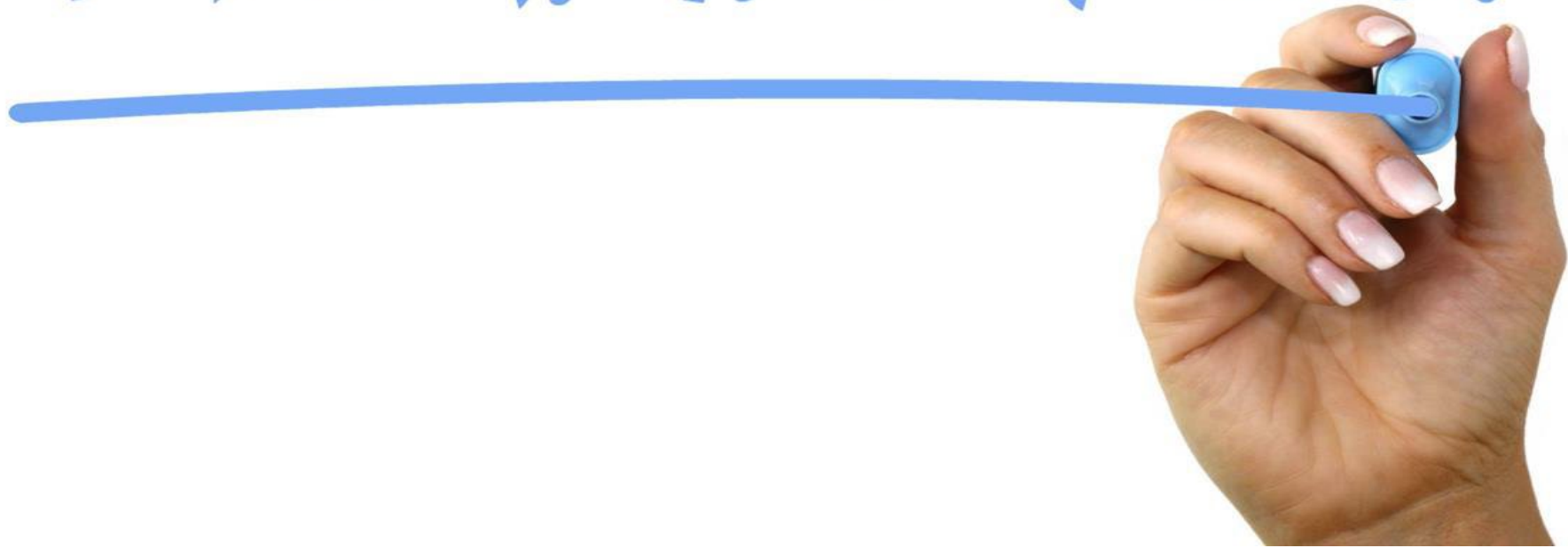
Cons: GLJP 7232086 Bay: 0 0

It is possible to view previous smoking assessments that have been completed

Select the patient on the ward list and press the history button

Ward Code	RB03
User	Admin User
Submitted	03/03/2021 10:40:24
It is advised that all patients admitted to hospital complete a carbon monoxide test. Would the patient like to do this now?	Yes
CO reading	21 ppm
Do you smoke?	No
How soon after you wake up do you smoke your first cigarette?	
Do you find it difficult to stop smoking in no-smoking areas?	
Which cigarette would you hate most to give up?	
How many cigarettes per day do you usually smoke?	
Do you smoke more frequently in the first hours after waking than during the rest of the day?	
Do you smoke if you are so ill that you are in bed most of the day?	
NRT recommendation selected	
Has the patient been referred?	
Dependence level	

THANK YOU





Northumbria Healthcare
NHS Foundation Trust



Identifying patients who smoke – how do we do that?

Lisa Irving

Public Health Strategy & Programme Manager

Lisa.Irving@northumbria-healthcare.nhs.uk

Where did we start?

Two different community stop smoking services

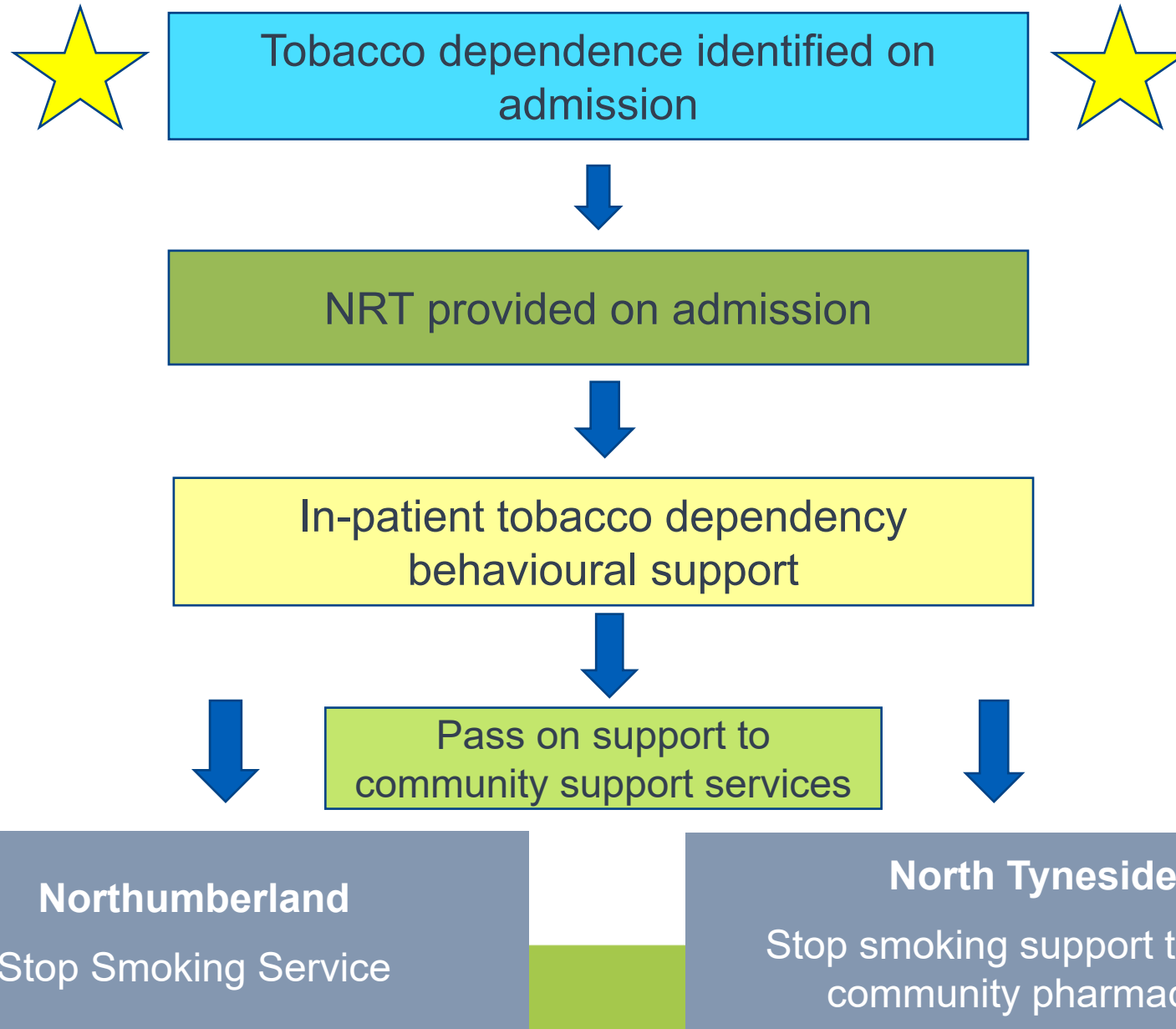
Northumberland
Specialist Stop Smoking Service

North Tyneside
Stop smoking support through
community pharmacies

Tobacco dependency support and treatment in the trust

- Support available from staff
- Referrals for support to stop smoking could be made from wards for discharge
- NRT prescribed by doctor
- Some specialist pathways - Stop Before the Op

Where did we want to be?

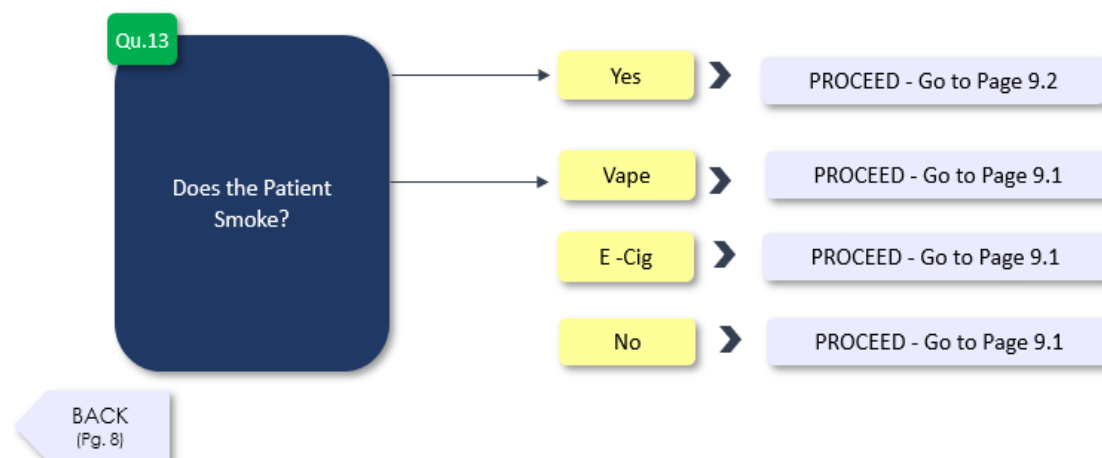


How do we identify patients who are tobacco dependent?

- Build into hospital inpatient system – Nervecentre
- Part of nursing assessment – can't be bypassed
- Prompts for treatment, referral and VBA
- Separate section for health coach intervention

What does it look like?

nervecentre



Adjusted to separate smoking and vaping.

nervecentre

Qu.13a

Have they ever
smoked?

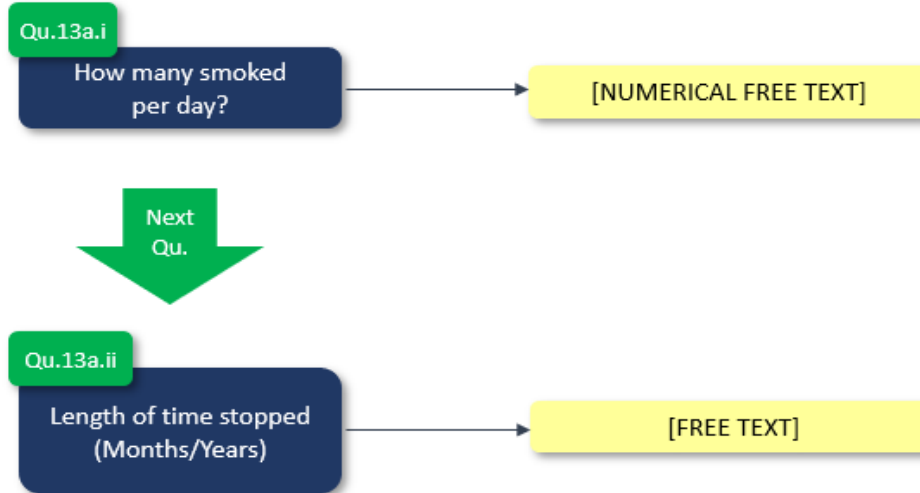
No

END OF CHAPTER
(Back to INDEX Pg.1)

Yes

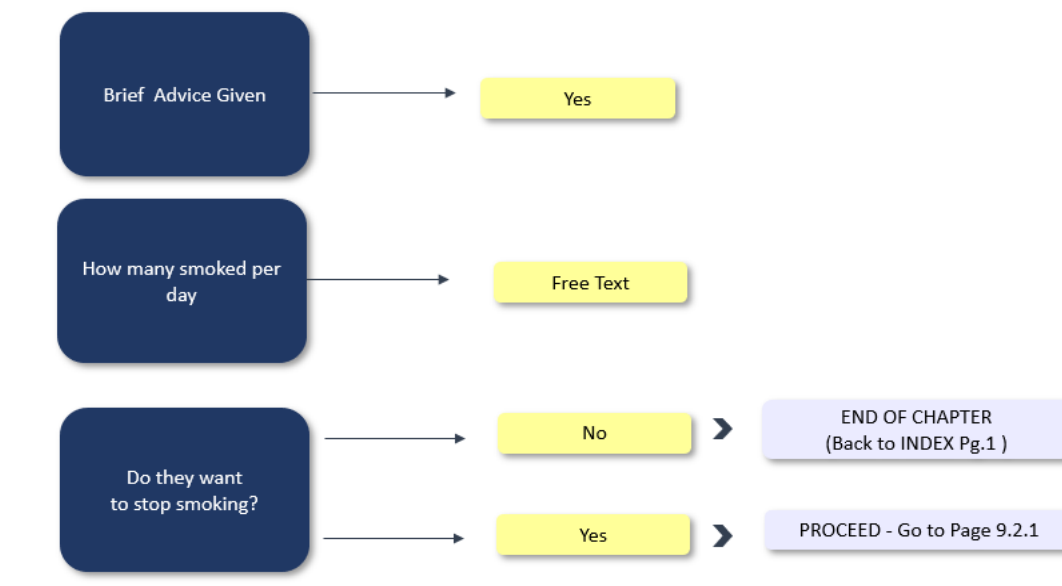
PROCEED - Go to Page 9.1.1

BACK
(Pg. 5)



Wording being adjusted

Remove - how many smoked per day
If length of time less than 4 weeks go to 9.2



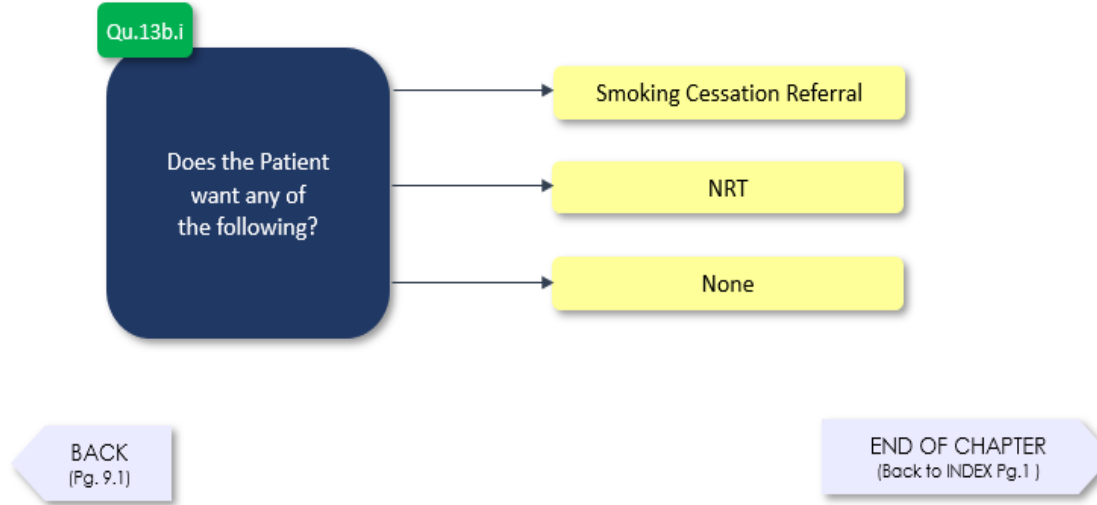
Wording being adjusted

Very brief advice on smoking given Yes No

Add - While you are in hospital we will be providing you with nicotine replacement therapy to help you manage your tobacco dependence and to help you feel more comfortable.

Remove - how many smoked per day

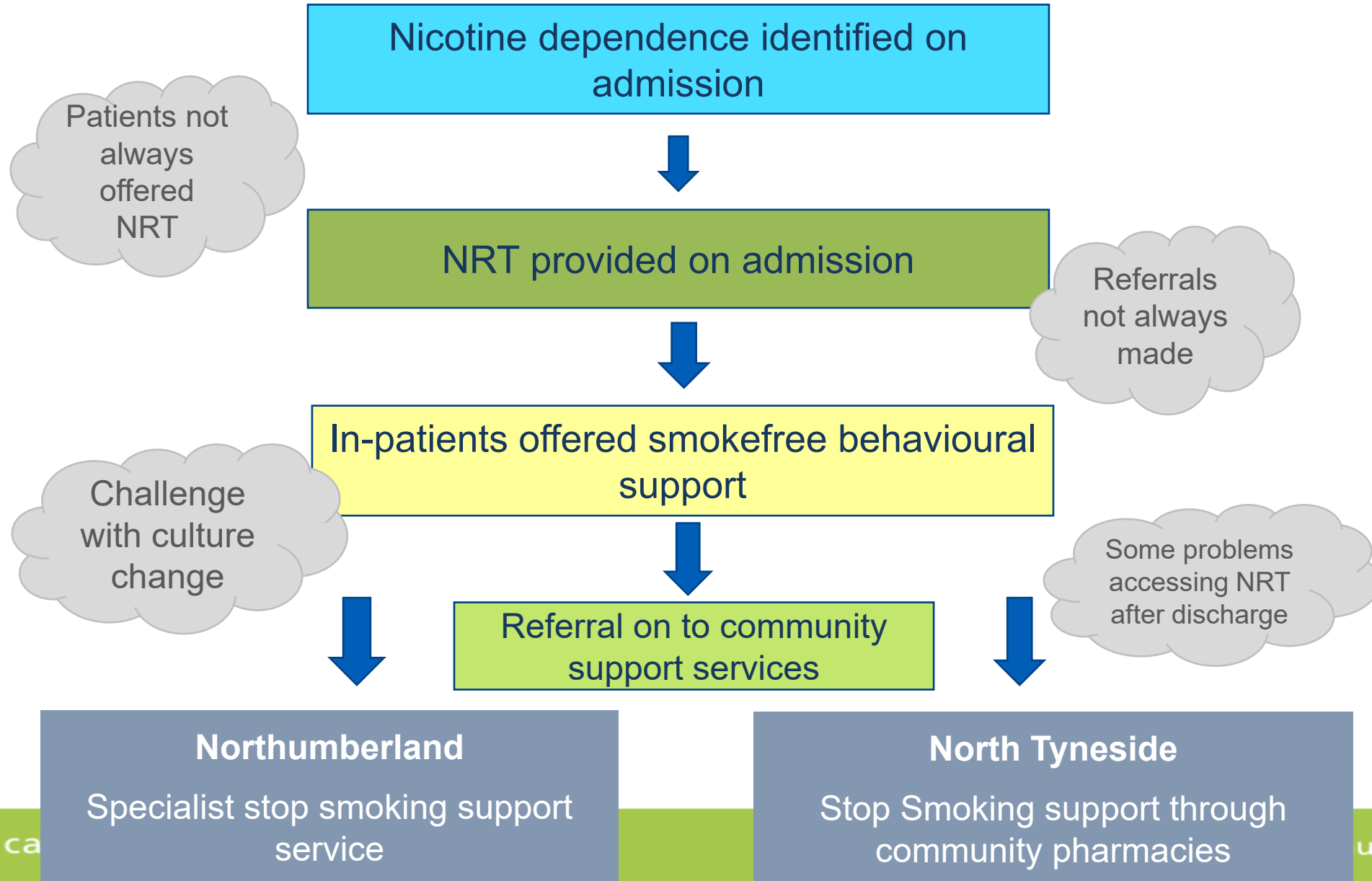
Remove - “Do they want to stop smoking?”



Wording being adjusted

Patient informed of referral to tobacco dependency team	Yes	No
Patient provided with nicotine replacement therapy (NRT)	Yes	No
Patient declines NRT <input type="checkbox"/>		
Patient unable to accept NRT <input type="checkbox"/>		
Patient declines referral <input type="checkbox"/>		

What do we have now?



How did we get there?

Multi level support

- NRT protocol
- Nicotine Management and Smokefree Policy
- Smokefree Steering group with clinical lead

Embed in existing processes

- Admissions process
- Nervecentre
- Alcohol and tobacco CQUIN indicators

Staff training

- Nervecentre training
- Dedicated Very Brief Advice (VBA) training
- Opportunistic and flexible training

Road shows

- All sites
- To communicate smokefree message to staff and patients
- Information stand and smokefree team

Team / management meetings

- Meetings /presentations with teams to communicate processes
- Management meetings to communicate impact on staff and patients

An illustration of two blue birds in flight, positioned in the upper left quadrant of the slide.

Thank you





IN PARTNERSHIP WITH



British
Thoracic
Society

Many thanks for your time and attention

