British Thoracic Society

Webinar Series 2 – Session 2

How do I encourage uptake of treatment options to inpatients?

Thursday 26th May 2022

Speakers – Webinar session 2, 26th May 2022

What are the innovative ways to speed up access?

- *Arran Woodhouse & Stephanie Duckworth Porras, Tobacco Dependence Leads, Kings' College Hospital NHS Foundation Trust*

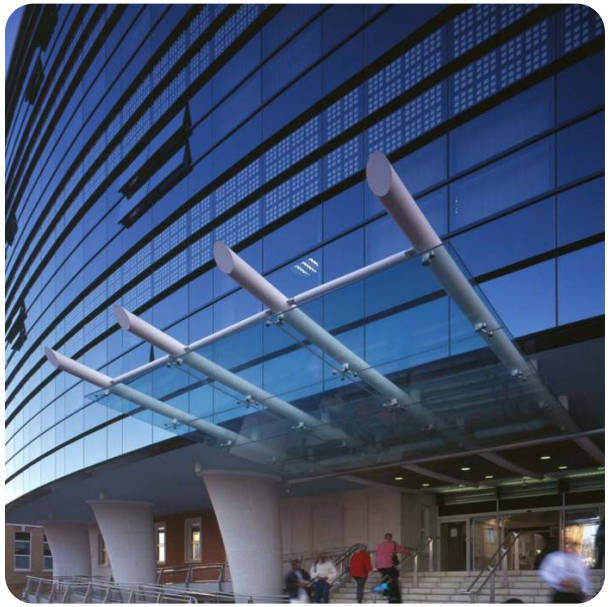
Improving uptake from patients

- *Ruth Armstrong - Smoking Cessation Lead, Brio Leisure, Chester*

What are the innovative ways to speed up access?

Stephanie Duckworth-Porras
Tobacco Dependence Specialist
s.duckworthporras@nhs.net

Arran Woodhouse
Lead Tobacco Dependence Specialist
arranwoodhouse@nhs.net



Background

NHS Long Term plan

Ottawa model pilot started at Kings January 2020 with two tobacco dependence specialists covering 2 acute and 2 surgical wards

Since January 2022 nine wards and four tobacco dependence specialists
Calls post discharge at 3 days, 14 days, 30 days and monthly up to 180 days

2024 is target date for all wards

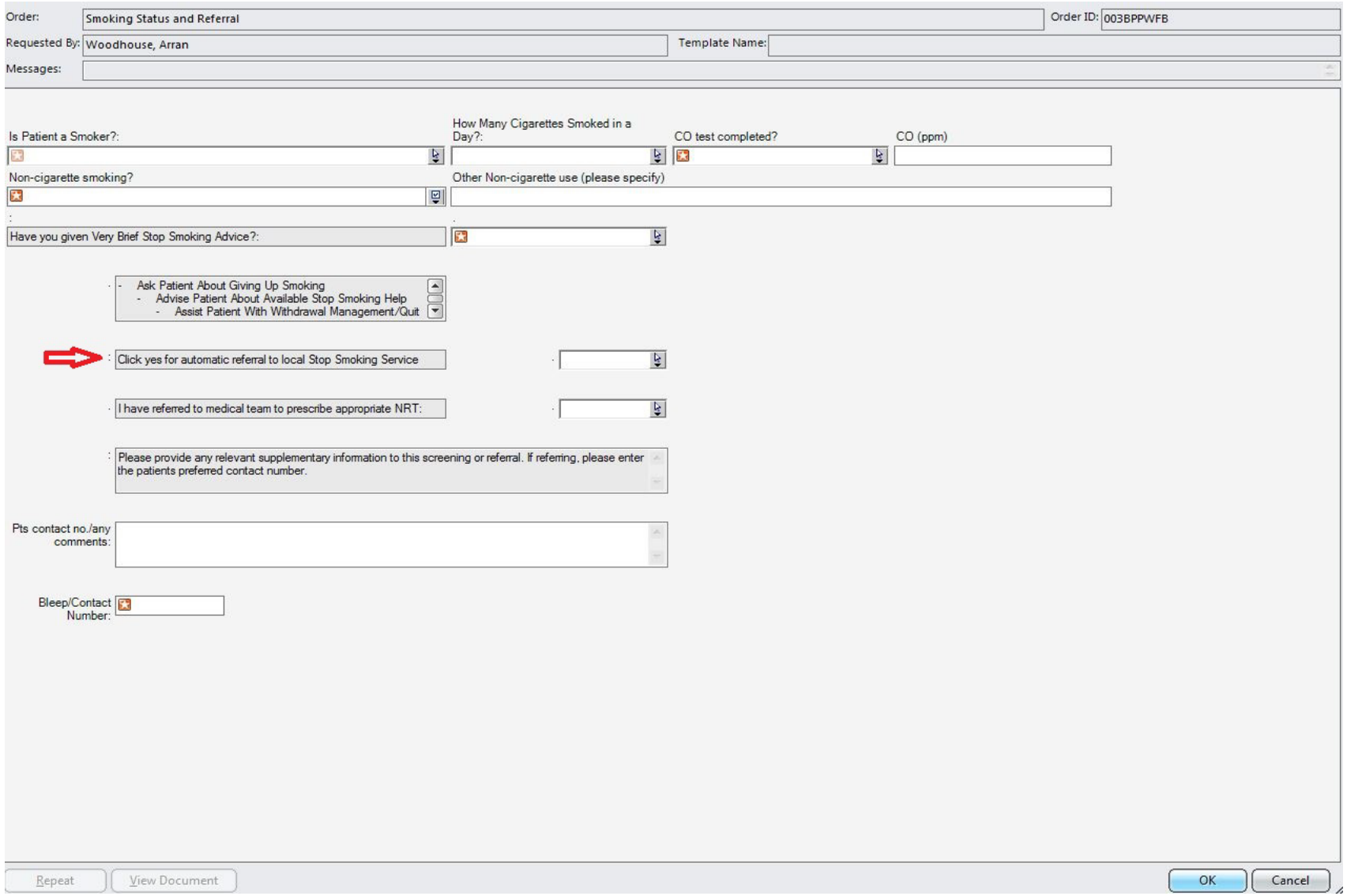
Trust Smokefree policy is supported by good care for smokers

Options for inpatients that smoke

Option 1 – temporarily abstain from smoking during their admission, ***with or without*** pharmacological support

Option 2 – use the opportunity to make a sustained quit attempt, **with or without** pharmacological support

Recording the outcome on EPR



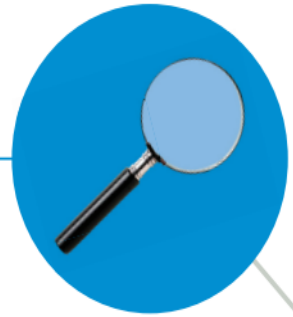
TDT Specialists' roles

Identifying smokers

Review Electronic Patient Record

If no smoking status identified check notes of current admission for information

Note how much smoked, other substances, additional information



TDT

Collaborate on seeing all identified smokers of the day

Use phones while on the wards to ask for help or call office

Check every other day if patients have been discharged & call at day 3

NRT

Offer to inpatient smokers

Request prescription from doctors in ward office or bleep

Check prescription given to patient - PRN

Ask patient how working – how they are using NRT, reduced cravings, motivation

TDT Specialists' roles

Develop and promote a ward based culture of treating tobacco dependent inpatients – nurses checking NRT used appropriately and answer queries, quarterly newsletter, regular report on screening rates, report successful quits at 6 months to wards

Train nurses to deliver Homely Remedies NRT every few months – 2 or 3 nurses at a time (45 minutes duration including questions and test)

Liaise with pharmacy team, check and review ward stock e.g. lozenges (minis or regular), nicotine gum flavours. Storage may be limited, be prepared to give a justification for extra products.

Homely Remedies training

Qualified nurses able to issue NRT from a limited formulary (patch, inhalator and mouthspray) for up to 72hrs, after which prescribed by medical team

Facilitates swift provision of NRT

45 minute training delivered on the ward, including a presentation, test and questions (scenarios) and FAQ's

Includes knowledge about withdrawal symptoms

Reinforces VBA training and empowers ward nurses

Factors affecting the treatment of tobacco dependence

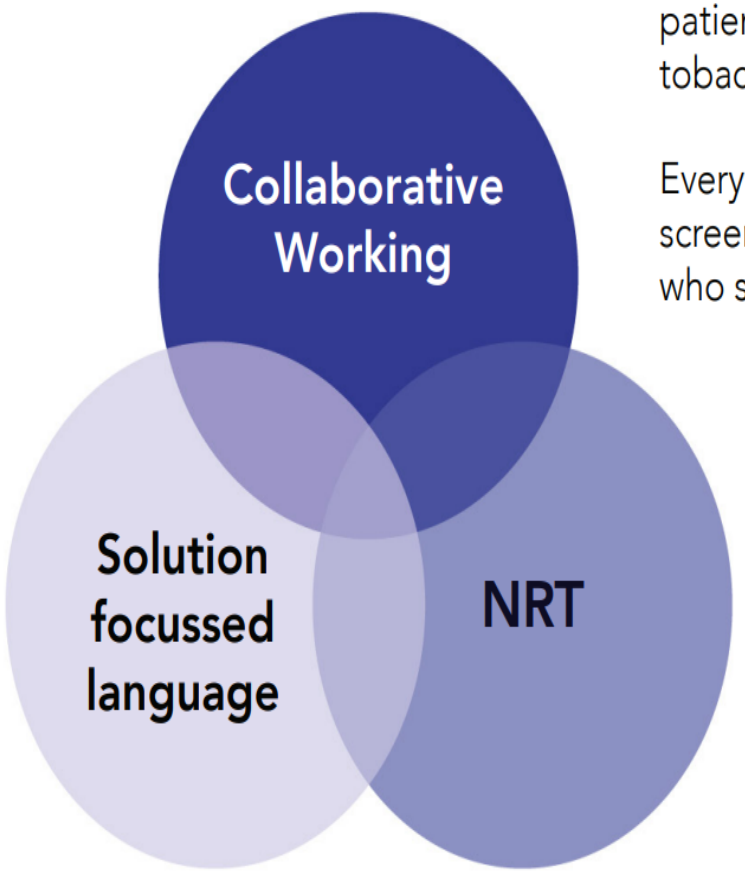
Staff beliefs about supporting patients who are dependent on tobacco.

Everybody is responsible; timely screening & documentation of patients who smoke; ensure all nurses are trained

Offer solution to patient experiencing withdrawal symptoms.

Informal approach to conversation: Would you like us to give you a quick ring to see how you are getting on when you go home?

Most patients agree even if they have said they opt for temporary abstinence.



Knowledge about NRT & why it matters;

PRN patient needs to know to ask; availability on wards

21 mg patch, nicotine inhalator and mouthspray

Summary

Work with pharmacists on wards, explain about Ottawa Model and the role of NRT. Need to ensure NRT is in plentiful supply on the wards. No delay for patients.

Qualified nurses trained in Homely Remedies, aware of Trust Homely Remedies policy, dispense NRT within 30 minutes of admission to the ward. Reassuring for patients.

HCAs can still attend the training but not give out NRT

Doctors – either in ward office or bleep – to prescribe NRT for their patients

Thank you

Ruth Armstrong
Smoking Cessation Lead
Brio Wellbeing – Cheshire West

Ruth.Armstrong@brioleisure.org

Improving uptake

Helping smokers to stop is often the most effective (and cost effective) of all the health interventions they receive.

We know that some health care professionals have limited time constraints and it may feel that smoking is not the primary concern in relation to the wider picture of someone's life. The important thing to remember is that smoking impacts so many parts of their (and their families) lives including:

- Increased risk of early mortality
- Increased risk of living with a co-condition
- Interactions with many medications and reduces their effectiveness
- Financial costs to the household tipping the household into poverty
- Earlier need for Social Care interventions
- Increased risk of secondhand and thirdhand smoke exposure to others in the household

Making Informed Decisions

"Most of my patients have other priorities that are more important to them than changing their smoking behaviours: how do I raise smoking up their priority list?"

- Don't assume that your patients are not interested in changing their smoking behaviours.
- Offer practical help and support
- Allow them to make and informed decision about their smoking behaviours

The Key To Success

Language – how you broach the subject, often impacts on the response. Asking if someone smokes is a closed question. We recommend you use ‘have you ever smoked?’ and if it’s a yes, follow up with ‘when was your last cigarette?’

Tweak you language to **make it more comfortable**

Empathy – You may be asking them to make a change they have tried before unsuccessfully and the thought of trying again may fill them with fear

Be honest – help them understand why you’re bringing it up and make it personal to them

Brio Wellbeing

Any Questions?

Respiratory Futures

IN PARTNERSHIP WITH

British Thoracic Society

Many thanks for your time and attention