



Appendix B: Behaviour change techniques (BCTs) for smoking cessation

For information on the development of the competency frameworks, see Competency framework for tobacco dependence treatment in secondary care: Evidence and methods (Appendix A).

Intervention: Very Brief Advice on Smoking

KEY:

IP = inpatient services
OP = outpatient services
M = maternity services
MH = mental health services
LD = learning disability services

◆ = Core BCTs with evidence of effectiveness from randomised controlled trials

| Competence (BCT code) | IP | OP | M | МН | LD |
|---|----|----|---|----|----|
| Demonstrate an understanding of consequences of smoking and benefits of | • | • | | • | • |
| smoking cessation to patient's current condition, overall health and smoking | | | | | |
| related co-morbidities (BM1) | | | | | |
| Demonstrate an understanding of how smoking affects pregnancy, foetus and new | | | • | | |
| born baby (BM1) | | | _ | | |
| Demonstrate ability to address myths and concerns about stopping smoking in pregnancy | | | • | | |
| Demonstrate an understanding of impact of smoking on mental health and benefits | | | | • | |
| of stopping smoking | | | | | |
| Build rapport (RC1) | | | • | | |
| Demonstrate an understanding of factors which are associated with smoking among | | | | | • |
| persons with learning disabilities (e.g. coping, social environment, dependence) | | | | | |
| Communicate in an empathic and non-judgmental manner, using reflective | | | • | | |
| listening and providing reassurance throughout (RC7 and RC10) | | | | | |
| Demonstrate ability to use effective communication techniques to engage patients | | | | | • |
| who smoke and involve carers as appropriate in stop smoking plan | | | | | |
| Demonstrate an understanding of how tobacco dependence develops and nicotine | • | • | • | • | • |
| withdrawal symptoms (RC6) | | | | | |
| Demonstrate ability to boost patient motivation and self-efficacy (BM2) • | • | • | • | • | • |
| Demonstrate ability to tailor interactions with patients appropriately (RD1) | • | • | • | • | • |
| Be familiar with first line stop smoking medications and guidance on the use of e- | • | • | • | • | • |
| cigarettes (vapes) | | | | | |
| Demonstrate ability to assess and record current and past smoking behaviour | • | • | • | • | • |
| including use of e-cigarettes (RI1) | | | | | |
| Demonstrate appropriate conduct of carbon monoxide (CO) testing (BM11) | | | • | | |
| Ability to explain role of CO testing in pregnancy and support its use as a | | | • | | |
| motivational intervention (RC3) | | | | | |
| Ability to explain results of carbon monoxide testing to women | | | • | | |
| Demonstrate the ability to ask about significant others who smoke and assess exposure to secondhand smoke | | | • | | |

| Be able to provide personally relevant information on consequences of smoking, importance smoking cessation (BM1) | • | • | • | • | • |
|--|---|---|---|---|---|
| Advise women on the effect of smoking on themselves and their baby | | | • | | |
| Advise women on the importance of stopping early in pregnancy, but also the | | | • | | |
| benefits of stopping at any time during pregnancy | | | | | |
| Be able to provide personally relevant information on importance of stopping smoking completely versus cutting down the number of cigarettes smoked (BM1 and RC6) | | | • | | |
| Provide information on withdrawal symptoms (RC6) ◆ | • | • | • | • | • |
| Demonstrate ability to Inform patient of what help is available (A5) | • | • | • | • | • |
| As appropriate, be able to effectively advise patients that the facility is a smokefree site and that help is available to both manage not being able to smoke whilst in hospital (temporary abstinence) and to assist with a quit attempt | • | | • | • | • |
| Be able to discuss with patients who smoke preparing for an admission to a smokefree setting including developing an advance plan for tobacco dependence treatment | | | | • | • |
| Be confident in discussing the role of stop smoking medications in supporting | • | • | • | • | • |
| quitting (i.e. managing withdrawal and cravings) (A1) | | | | | |
| Be aware of process for arranging a stop smoking consultation with the stop smoking practitioner (A5) | • | • | • | • | • |
| Be aware of process of documenting in patient notes what action has been agreed (P1) | • | • | • | • | • |
| Be aware of process to follow if patient does not want any support at this time (A5) | • | • | • | • | • |
| Demonstrate awareness of proper recording of smoking status at time of delivery (SATOD) | | | • | | |
| For clinical staff: | | | | | |
| Be familiar with the contraindications and special considerations for stop smoking medications | • | • | • | • | • |
| Be confident in initiating nicotine replacement therapy (NRT) to manage withdrawal from tobacco within 48 hours of admission based on patient's level of nicotine dependence (A1) | • | | | • | • |
| Be able to instruct patients on correct use of NRT products (A1) | • | | • | | |
| Be able to instruct patients on correct use of stop smoking medications (NRT, varenicline, bupropion) (A1) | • | • | | • | • |
| Be familiar with effects of smoking cessation on psychotropic and other medications, and medications requiring monitoring following smoking cessation, and demonstrate ability to communicate about this with other mental health team members | • | • | | • | • |

Intervention: In-depth smoking cessation intervention

KEY:

IP = inpatient services
OP = outpatient services
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LD = learning disability services

◆ = Core BCTs with evidence of effectiveness from randomised controlled trials

| Competence (BCT code) | IP | OP | PW | MH | LD |
|---|----|----|----|----|----|
| Describe to patients and family members what to expect from the stop smoking intervention (BM1) | • | • | • | • | • |
| Enhance patient's motivation and self-efficacy (BM2)◆ | • | • | • | • | • |
| Build rapport (RC1) | • | • | • | • | • |
| Communicate in an empathic and non-judgmental manner, using reflective listening and providing reassurance throughout (RC7, RC10) | • | • | • | • | • |
| Elicit the patient views and questions on smoking, smoking cessation, answering questions in a clear and accurate manner (RC2, RC8) | • | • | • | • | • |
| Summarise information for patients and family/carers (RC9) | • | • | • | • | • |
| Demonstrate an understanding of factors which are associated with smoking among persons with learning disabilities (e.g. coping, social environment, dependence) | | | | | • |
| Demonstrate ability to tailor interactions to patients with learning disabilities including short term planning, more frequent follow-up, use of visual aids, role play (RD1) | | | | | • |
| Be familiar with latest evidence-based practices for supporting smoking cessation among inpatients/outpatients/pregnant women/mental health services users/LD | • | • | • | • | • |
| Assess current and past smoking behaviour including level of nicotine dependence (RI1) | • | • | • | • | • |
| Assess woman's understanding of health consequences of smoking in pregnancy to them and their baby | | | • | | |
| Assess commitment, readiness and ability to quit smoking (RI2) ◆ | • | • | • | • | • |
| Assess past history of quit attempts (RI3) | • | • | • | • | • |
| Assess physical and mental functioning (RI3) | • | • | • | • | • |
| Assess social cues and social environment | | | | | • |
| Demonstrate appropriate conduct of CO testing and explain results to women (BM11) | | | • | | |
| Provide personally relevant information on consequences of smoking and importance of quitting tailored to patient's medical condition (BM1) | • | • | • | • | • |
| Provide information on nicotine addiction, withdrawal symptoms and the quitting process (RC6) | • | • | • | • | • |
| Emphasise the importance of the 'not a puff' rule (BM10) ◆ | • | • | • | • | • |
| Help patients develop strategies to cope with barriers, cues to smoke and relapse triggers, and advise on changing routines (BS1, BS7) | • | • | • | • | • |
| Facilitate and advise on use of social support (from friends, relatives, colleagues and 'buddies') (A2) | • | • | • | • | • |
| Development of personal treatment plan (BS3) | • | • | • | • | • |
| Prompt commitment from the patient to treatment plan and ' $\frac{1}{1}$ nule (BM6) | • | • | • | • | • |
| Deal appropriately with 'lapses' to minimise the likelihood that they will lead to full 'relapse' (BS2) ◆ | • | • | • | • | • |

| Offer/direct towards written support materials (RC5) | • | • | • | • | • |
|--|---|---|---|---|---|
| Be aware of significant drug interactions associated with stoppingsmoking and their relevance to patient | • | • | • | • | • |
| Explain role of stop smoking medications in supporting quit attempt (A1) | • | • | • | • | • |
| Assess contraindications to stop smoking medications and patient's past experience (A1) | • | • | • | • | • |
| Enable local procedures to provide medications at bedside (A3) | • | • | • | • | • |
| Provide instructions on correct use of stop smoking medications (A1) | • | • | | • | • |
| Provide instruction on correct use and dosage of NRT including combination therapy (A1) | | | • | | |
| Assess patient's experience with using stop smoking medications, including usage, side effects and perceived benefits (A4) | • | • | • | • | • |
| Advise patients on medication use and adjust medication dose/use in light of their experiences (A1) ◆ | • | • | • | • | • |
| Provide instructions on use of stop smoking medication following discharge from hospital (A1) | • | | | | |
| Be confident in discussing the use of e-cigarettes (vapes) with patients, who choose to use them, including the selection and use of these devices, plus e-liquid strength | • | • | • | • | • |
| Demonstrate appropriate documentation of patient treatment plan (P1) | • | • | • | • | • |
| Be able to coordinate referral to available out-patient stop smoking support (A5) | • | | • | • | • |
| Demonstrate ability to communicate to patient information on outpatient stop smoking support (A5) | • | | • | • | • |