NCSCT

NHS Scotland Stop Smoking Adviser eLearning

Learning outcomes

The learning outcomes for the NCSCT NHS Scotland stop smoking adviser module are listed within this document.

To fully meet the learning outcomes listed below, it is recommended that in addition to completing this eLearning module that stop smoking advisers receive in-person training (virtual or face-to-face) to ensure confidence and competence in the delivery of the evidence-based behaviour change techniques associated with multi-session stop smoking support.

Stop Smoking Advisers will also need training on local processes and protocols to fully achieve the learning outcomes.

- ♦ = Core behaviour change techniques (BCTs) with evidence of effectiveness from randomised controlled trials

Knowledge

1. Smoking in the population

- describe prevalence and patterns of smoking and stopping smoking as functions of demographic characteristics such as gender, age, ethnicity and socio-economic status
- describe prevalence and patterns of smoking and smoking cessation in priority groups, such as pregnant women who smoke and those with mental health problems
- describe changes in smoking and smoking cessation patterns over time and across different demographic groups

2. Smoking and health

- list the major life-threatening and non life-threatening diseases to which smoking contributes
- ♦ demonstrate an understanding of the clustering of smoking and other health behaviours
- ♦ describe the physical health, mental health and social benefits of stopping smoking
- ♦ describe the increased risk of premature death from smoking and the benefits of stopping at different ages
- describe the harmful effects of smoking during pregnancy
- give an accurate and balanced indication of any potential beneficial effects of smoking
- describe the harmful effects of secondhand smoke

- describe any effects of stopping smoking on dosages of drugs used to treat conditions such as psychotic disorders

3. Stopping smoking

- accurately describe the process of stopping smoking in a way that reflects that attempts to stop can be arrived at suddenly or gradually, the importance of avoiding 'lapses'
- describe the factors that promote quit success and protect against relapse
- describe the factors that deter quit attempts and promote relapse
- explain what is meant by tobacco addiction and nicotine dependence and how these develop
- list nicotine withdrawal symptoms and their natural time course
- describe the common reasons people who smoke give for why they smoke and how far these reflect the true effects of smoking
- describe environmental, socio-demographic and psychological factors associated with cigarette addiction

4. Stop smoking treatments

- describe the principles, and long-term and short-term effectiveness, of behavioural support (individual and group-based)
- identify potential difficulties associated with providing group-based support, such as client recruitment
- describe the full range of evidence-based medications available to aid smoking cessation, including their efficacy; correct use; contra-indications and cautions, drug interactions, side-effects; and relevant clinical guidelines
- explain why complementary therapies and unproven commercial treatment programmes for smoking cessation should not be made available or recommended
- show understanding of the principles and methodology of measurement of biomarkers of smoking, such as carbon monoxide (CO)

5. The wider context

- demonstrate an understanding of health inequalities associated with tobacco use in Scotland
- show awareness of the contribution of smoking cessation to public health and to reducing health inequalities
- demonstrate understanding of the role smoking cessation plays in wider tobacco control strategies
- describe the cost effectiveness of smoking cessation interventions compared with other life-saving clinical interventions

Skills

6. General communication and engagement

- build rapport with clients
- recognise and reflect on barriers to effective communication and modify communication in response
- communicate in an empathic and non-judgmental manner, using reflective listening and provide reassurance throughout
- elicit client views and questions about smoking, stopping smoking, and any aspect of behavioural support, answering questions in a clear and factually accurate manner describe to clients the expectations regarding the treatment programme, including its typical length and content, plus what it requires of clients
- offer/direct clients to appropriate materials in ways that promote their effective use
- inform clients' partners, carers and/or family members of what local support is available to help them stop smoking
- provide clients with summaries of the information they have received and prompt confirmation from clients regarding any decisions or commitments they have made
- communicate with client care teams to confirm health status and current medication, and maintain regular contact with clients' prescribers (if this is indicated) for people whose medication is potentially affected by smoking, to ensure safety

7. Assessment

Assess clients:

- commitment, readiness and ability to quit throughout the quitting process
- past smoking behaviour, including past history of quit attempts
- self-reported and CO-validated smoking behaviour and deal appropriately with any discrepancies that may arise between these. Explain the reasons for measuring CO both prior to and after the quit date
- level of available social support, including assessment of the client's contacts who smoke
- degree of nicotine addiction using validated tools such as the Heaviness of Smoking Index (HSI) or Fagerström Test for Nicotine Dependence (FTND)
- nicotine withdrawal symptoms
- psychological state (e.g. depressed mood), insofar as it is relevant to the quit attempt, and know when/how to seek additional healthcare support when indicated
- the need to collaborate with other services involved in clients' care

8. Planning behavioural support

- inform clients about the abrupt quit treatment programme and how it works
- assist clients to set a quit date
- use relevant information from a client to tailor behavioural support
- show an appreciation of client choice, and emphasise a client's choice and preferences within the bounds of evidence-based practice

9. Addressing motivation

- provide clients with accurate information on the consequences of smoking and stopping smoking (mental health, physical health and quality of life benefits) in a way that maximises motivation to quit or stay quit
- describe to the client the principles and effectiveness of typical behavioural support and stop smoking medications that can support a quit attempt
- apply appropriate behavioural support strategies to enhance a client's motivation and self-efficacy
- maximise the client's commitment by asking them to affirm a strong commitment to start, continue, or restart the quit attempt
- assist the client in identifying their reasons for wanting to stop smoking and address
- concerns that they may have about the possible negative aspects of stopping
- emphasise to the client the importance of, and secure commitment to, the 'not a puff' rule once the quit date has been reached
- deal appropriately with 'lapses' to minimise the likelihood that they will lead to full 'relapse'
- provide feedback on clients' performance and progress towards becoming permanently smokefree, including praise contingent on successfully remaining abstinent
- help to strengthen the client's 'ex-smoker' identity (e.g. encouraging the person to regard smoking as no longer part of his or her life)
- use expired air CO measurement as a motivational tool to assess the extent of clients' smoke exposure prior to quitting and to confirm successful abstinence

10. Supporting the client to exercise self-control

- accurately describe to the client what they may experience in terms of nicotine withdrawal symptoms and suggest evidence-based approaches to alleviate these
- discuss barriers, triggers, and relapse predictors and assist the client in developing appropriate strategies to cope with them
- assist the client in setting achievable goals (e.g. one day at a time) that support the aim of remaining abstinent, and prompt frequent review of progress towards the goal of being permanently smoke-free

- discuss the restructuring of the client's social life, including specific advice on avoiding exposure to social cues for smoking
- discuss potential ways of changing the client's daily routines and physical environment in order to minimise exposure to smoking cues (e.g. removing ashtrays)
- suggest ways of minimising stress and other psychological demands so as to conserve mental resources
- for concerned clients, outline weight and alcohol/caffeine consumption control methods

11. Promoting effective use of stop smoking medications and other supporting activities

- describe to clients the full range of pharmacological therapies available and how they work; and assist clients in choosing which stop smoking medication is best suited to their needs, giving practical information and /or demonstrations on their use and monitoring the continued suitability of the chosen product
- assess the client's experience of any stop smoking medications that they are using, including enquiries into their usage, side effects and benefits experienced
- advise clients appropriately on adjusting stop smoking aid use in light of withdrawal symptoms, urges to smoke and side effects
- enact the necessary local procedures to ensure the client receives their medication easily
- facilitate and advise on the client's use of social support from friends, relatives, colleagues, or 'buddies'
- provide options for obtaining additional and later support (including telephone and online support) where this is available

Professional practice

Local training should ensure that advisers are able to do the following:

- keep accurate records of the number of clients seen and (clinical) success rates as outlined in national guidance
- accurately record information necessary for local and national monitoring
- regularly reflect on own practice and assess possible areas for improvement
- undertake the duties of a Stop Smoking adviser in a way that meets the appropriate ethical standards
- obtain and accurately interpret important new information that relates to practice
- work with the broader health and social care sector to optimise support to clients
- recognise when treatment or interpersonal challenges have occurred and when it is necessary to reach out to other advisers, team managers, or other healthcare professionals for practice supervision/guidance
- facilitate intervention ending in a planned manner
- work within service boundaries and professional limitations