

Introduction

The NHS Long Term Plan has committed to delivering tobacco dependence treatment (TDT) to all inpatients admitted to hospital overnight. Frontline staff will need to be upskilled to be able to provide these interventions, and NHS England and the National Centre for Smoking Cessation and Training (NCSCT) have developed this competency framework for inpatient tobacco dependence treatment to support training and staff development.

The competency framework supports the **NHS Acute Inpatient Tobacco Dependence Treatment recommended delivery model and its three Care Bundles**: <https://www.ncsct.co.uk/library/view/pdf/NHS-STP-admission-care-bundle.pdf>

This document describes the competences required for staff with responsibilities for providing:

- 1.1 Very brief advice on smoking (VBA)
- 1.2 Point of admission treatment (Admission Care Bundle)
- 1.3 Tobacco dependence intervention (Inpatient Care Bundle)
- 1.4 Post-discharge intervention (Post-Discharge CareBundle)
- 1.5 Leadership

The competency framework is organised by intervention and identifies the individual competences (knowledge and skills) required to deliver these interventions. The framework also identifies training and other resources where these competences can be gained, along with suggestions for maintaining the competences.

Behaviour Change Techniques: Behaviour Change Techniques (BCTs) to support the delivery of tobacco dependence treatment have been established, see *Competency framework for tobacco dependence treatment in secondary care: Evidence and methods* (Appendix A). The relevant BCT codes are found in brackets after each competence. The full list of BCTs can be found in *Behaviour change techniques for smoking cessation* (Appendix B).

For the most part, delivery of these interventions is not restricted by role or grade but rather determined by the competences attained through training and experience. The competences described in the framework are applicable to NHS staff at differing grades, but also to non-clinical and non-NHS staff. The decision on competence for prescribing tobacco dependence aids via a patient group direction (PGD) is made at a local level, but a separate template has also been drawn up. For this, see *Template competency framework for recommending and prescribing tobacco dependence aids* (Appendix C).

1.1 Very brief advice (VBA) on smoking for acute hospital inpatients

Description: Very brief advice on smoking (VBA) is an evidence-based intervention proven to prompt attempts to stop smoking. It is designed to be delivered to **all** patients admitted to hospital by any member of the staff. VBA involves asking patients about their smoking status, advising patients who smoke on the best method of stopping smoking, and acting upon the patient's response to this advice.

Staff group: All NHS staff who have contact with inpatients.

Patient group: All inpatients. Families and carers of inpatients where appropriate.

TDT	Purpose	Patient group	Competences (BCT code)
General	Demonstrate adequate knowledge about smoking and tobacco dependence	All patients	<ul style="list-style-type: none"> ▪ Demonstrate an understanding of consequences of smoking and benefits of stopping smoking to patient's current condition, recovery, and overall health (BM1) ▪ Demonstrate an understanding of how tobacco dependence develops and knowledge of tobacco withdrawal symptoms and recognise their presentation in hospital (BM1, RC6) ▪ Be familiar with first choice tobacco dependence aids including combination NRT, nicotine analogue medications, vapes (e-cigarettes) and guidance for their use including dosing protocols
Ask	Establish and document smoking status	All admitted patients	<ul style="list-style-type: none"> ▪ Demonstrate ability to identify and record current and past smoking behaviour including use of vapes (e-cigarettes) (RI1)
Advise	Provide brief advice and inform of support available	All patients who report current smoking or who have recently stopped	<ul style="list-style-type: none"> ▪ Be able to effectively advise patients and visitors that the hospital 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 stopping smoking long-term ▪ Be able to provide personally relevant information on consequences of smoking, importance of a smokefree admission and stopping smoking long-term (BM1) ▪ Demonstrate ability to inform patient of what help is available, including tobacco dependence aids and specialist support (A5)
Act	Act on patient's response to Advise	(within the past two to four weeks)	<p>All staff</p> <ul style="list-style-type: none"> ▪ Be aware of process for arranging an opt-out referral to the in-house tobacco dependence team / Adviser (A5) ▪ Be aware of process for documenting what action has been agreed in patient notes (P1)

Recommended training and skills assessment:

The recommended training for this competency is the e-learning “***Treating tobacco dependence in inpatient acute and mental health care***”. This training can be accessed via the NHS Learning Hub: <https://learninghub.nhs.uk/Catalogue/tobaccodependenceinpatienttraining>.

Demonstrating competency: In order to demonstrate competency in the delivery of VBA, staff should:

- successfully complete online training and any associated assessment
- observe the delivery of VBA from a trained colleague, and
- be observed delivering VBA to at least two patients by a trained colleague.

Maintaining competency: Annual refresher training in the delivery of VBA is recommended.

Additional resources: Below is a list of supplementary online and print resources currently available to support staff in the delivery of point of admission tobacco dependence treatment. Please note that these resources need to be implemented in the context of NICE guidelines (<https://www.nice.org.uk/guidance/ng209>).

Admission Care Bundle – Tobacco Dependence Treatment	https://www.ncsct.co.uk/library/view/pdf/NHS-STP-admission-care-bundle.pdf
Standard Treatment Plan for Inpatient Tobacco Dependence Treatment	Full document: https://www.ncsct.co.uk/publications/STP-inpatient-acute Clinical checklists: https://www.ncsct.co.uk/library/view/pdf/Inpatient-STP-checklists.pdf
Key messages and best practices: Inpatient tobacco dependence treatment	https://www.ncsct.co.uk/library/view/pdf/Inpatient-TD-best-practices-and-key-messages.pdf
Call to action films – Tobacco dependence treatment: A new standard of care Acute Trust	https://www.ncsct.co.uk/publications/inpatient-acute-TDT-film
Tobacco Dependence Aids Quick Reference	https://www.ncsct.co.uk/library/view/pdf/NCST-tobacco-dependence-aids-quick-reference-v1.pdf
NCST secondary care factsheets	https://www.ncsct.co.uk/pub_secondary-care-resources.php
Top five myth busting tips on nicotine use for treatment of tobacco dependence in inpatient settings	https://www.ncsct.co.uk/publications/top-five-myth-busting-tips-on-nicotine-use

1.2 Point of admission treatment (Admission Care Bundle)

Description: Point of admission treatment of tobacco dependence is designed to be delivered to **all** patients within 2 hours of admission to hospital. Point of admission care consists of: 1) identification of smoking status, 2) provision of brief advice, 3) acute management of tobacco withdrawal; 4) opt-out referral (or notification) to the in-house tobacco dependence team.

Staff group: Members of the Admitting team.

Patient group: All inpatients.

TDT	Purpose	Patient group	Competences (BCT code)
General	Demonstrate adequate knowledge about smoking and tobacco dependence	All patients	<ul style="list-style-type: none">▪ Demonstrate an understanding of consequences of smoking and benefits of stopping smoking to patient's current condition, recovery, and overall health (BM1)▪ Demonstrate an understanding of how tobacco dependence develops, knowledge of tobacco withdrawal symptoms, and recognise their presentation in hospital (BM1 (RC6))▪ Demonstrate ability to boost patient motivation and confidence (self-efficacy) (BM2)▪ Demonstrate ability to appropriately tailor interactions with patients (RD1)▪ Be familiar with first choice tobacco dependence aids including combination NRT, nicotine analogue medications, vapes (e-cigarettes) and guidance for their use including dosing protocols
Identify	Identify tobacco use status	All admitted patients	<ul style="list-style-type: none">▪ Demonstrate ability to identify and record current and past smoking behaviour including use of vapes (e-cigarettes) (RI1)
Advise	Provide brief advice on importance of smokefree admission, role of NRT, and available treatment and support	All patients who report current smoking or who have recently stopped (within the past two to four weeks)	<ul style="list-style-type: none">▪ Be able to effectively advise patients and visitors that the hospital 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 stopping smoking long-term▪ Be able to provide personally relevant information on consequences of smoking, importance of a smokefree admission and stopping smoking long-term (BM1)▪ Be able to inform patient about tobacco dependence, withdrawal symptoms and urges to smoke (RC6)▪ Demonstrate ability to inform patient of what help is available including tobacco dependence aids and specialist support (A5)

			<ul style="list-style-type: none"> Where a patient chooses to do so, be able to advise on use of nicotine containing vape (e-cigarette) in line with NICE guidance
Treat	Initiate combination NRT using rapid NRT prescribing protocol. Consider use of a nicotine vape or nicotine analogue medications where appropriate	All patients who report current smoking or have recently stopped (within the past two to four weeks)	<ul style="list-style-type: none"> Be confident in initiating combination nicotine replacement therapy (NRT) to manage withdrawal from tobacco as soon as possible and ideally within 2 hours of admission based on patient's level of tobacco dependence (A1) Be able to instruct patient on correct use of combination NRT and individual products (A1) Be able to instruct patient on correct use of nicotine analogue medications and vapes (A1) Be familiar with significant drug interactions and medications requiring monitoring following changes to smoking status
Refer	Inform patient they will be referred to the in-house Tobacco Dependence Team and complete referral using local pathway	All patients who report current smoking or have recently stopped (within the past two to four weeks)	<ul style="list-style-type: none"> Be aware of process for arranging an opt-out referral to the in-house tobacco dependence team / Adviser (A5) Be aware of process to follow if patient does not want any support at this time (A5)
Record	Tobacco dependence diagnosis is recorded in patient medical record, ideally in the admission diagnosis list and disease management plan	All inpatients	<ul style="list-style-type: none"> Be aware of process for documenting what action has been agreed in patient notes (P1)

Recommended training and skills assessment:

The recommended training for this competency is the e-learning “*Treating tobacco dependence in inpatient acute and mental health care*”. This training can be accessed via the NHS Learning Hub: <https://learninghub.nhs.uk/Catalogue/tobaccodependenceinpatienttraining>.

Demonstrating competency: In order to demonstrate competency in the delivery of the Tobacco Dependence Treatment Admission Care Bundle, staff should:

- successfully complete online training and any associated assessment
- observe the delivery of admission care bundle from a trained colleague, and
- be observed delivering admission care bundle to at least two patients by a trained colleague.

Maintaining competency: Annual refresher training in the delivery of the admission care bundle is recommended.

Additional resources: Below is a list of supplementary online and print resources currently available to support staff in the delivery of the Inpatient Care Bundle. Please note that these resources need to be implemented in the context of NICE guidelines (<https://www.nice.org.uk/guidance/ng209>).

Admission Care Bundle – Tobacco Dependence Treatment	Acute (Medical) Trusts: https://www.ncsct.co.uk/library/view/pdf/NHS-STP-admission-care-bundle.pdf
Standard Treatment Plan for Inpatient Tobacco Dependence Treatment	Full document: https://www.ncsct.co.uk/publications/STP-inpatient-acute Clinical checklists: https://www.ncsct.co.uk/library/view/pdf/Inpatient-STP-checklists.pdf
Key messages and best practices: Inpatient tobacco dependence treatment	https://www.ncsct.co.uk/library/view/pdf/Inpatient-TD-best-practices-and-key-messages.pdf
‘Call to action’ films Tobacco dependence treatment: A new standard of care	https://www.ncsct.co.uk/publications/inpatient-acute-TDT-film
Tobacco Dependence Aids Quick Reference	https://www.ncsct.co.uk/library/view/pdf/NCsCT-tobacco-dependence-aids-quick-reference-v1.pdf
NCsCT secondary care factsheets	https://www.ncsct.co.uk/pub_secondary-care-resources.php
NRT Myths	https://www.ncsct.co.uk/publications/top-five-myth-busting-tips-on-nicotine-use
Nicotine replacement therapy (NRT)	https://www.ncsct.co.uk/publications/category/nrt
Varenicline	https://www.ncsct.co.uk/publications/category/varenicline
Cytisine (Cytisinicline)	https://www.ncsct.co.uk/publications/Cytisine-SPC
Bupropion (Zyban)	https://www.medicines.org.uk/emc/product/3827/smpc

1.3 Tobacco Dependence treatment (Inpatient Care Bundle)

Description: The tobacco dependence intervention involves the appropriate assessment of inpatients who smoke and development of a treatment plan consisting of behavioural support and tobacco dependence aids, as well as referral to post-discharge support. The initial focus will be on managing tobacco withdrawal while in hospital, followed by supporting long-term abstinence after discharge from hospital. The intervention will take the form of an initial consultation to establish the patient's tobacco dependence treatment plan, with follow-up consultations conducted to monitor and adjust the plan as needed. Treatment will be delivered on an opt-out basis and ideally within 24 hours of admission. Referral to support following discharge from the hospital is a fundamental component of the intervention.

Staff group: Members of the Tobacco Dependence Team. Other Staff responsible for delivering individual tobacco dependence interventions.

Patient group: All patients who report current smoking.

Intervention	Purpose	Competences
General communication and engagement	Engage patient in the development of their treatment plan	Demonstrate ability to: <ul style="list-style-type: none"> Describe to the patient and family members what to expect from the tobacco dependence treatment offered at trust (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 and RC10) Elicit the patient's views and questions on smoking and tobacco dependence treatment, answering questions in a clear and accurate manner (RC2 and RC8) Summarise information for patients and family (RC9) Support clinical teams with early management of tobacco withdrawal to support temporary abstinence (not smoking while in hospital) and ideally stopping smoking long-term Be familiar with latest evidence-based practices for delivering tobacco dependence treatment to inpatients Inform partners and/or family members of risks of smoking and what support is available by tobacco dependence team and following discharge from hospital
Assessment	Conduct assessment of patient's needs	Demonstrate ability to: <ul style="list-style-type: none"> Assess current and past smoking behaviour, including level of tobacco dependence

	to inform treatment plan	(RI1) <ul style="list-style-type: none"> Assess commitment, readiness and ability to stop smoking (RI2) Assess past history of smoking and attempts to stop (RI3) Assess physical and mental functioning (RI10)
Behavioural support	Deliver evidence-based behavioural support to patients at the bedside	Demonstrate ability to: <ul style="list-style-type: none"> Provide personally relevant information on consequences of smoking and importance of stopping tailored to patient's medical condition (BM1) Provide information on nicotine addiction and withdrawal symptoms (RC6) Develop a personal treatment plan (BS3) Emphasise the importance of the 'not a puff' rule as appropriate (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) Prompt commitment from the patient to the treatment plan (BM6) Deal appropriately with 'lapses' to minimise the likelihood that they will lead to full 'relapse' (BS2) Offer/direct towards written support materials (RC5)
Prescribe and/or dispense tobacco dependence aids	Promote effective use of tobacco dependence aids	Demonstrate ability to: <ul style="list-style-type: none"> Explain role of tobacco dependence aids in managing withdrawal symptoms/urges to smoke and supporting stopping long-term (A1) Assess contraindications to tobacco dependence aids and patient's past experience with use of aids (A1) Enable local procedures to provide medications at bedside (A3) Provide instructions on correct dosage and use of tobacco dependence aids (A1) Assess patient's experience with using tobacco dependence aids, including usage, side effects and perceived benefits (A4) Advise patients appropriately on adjusting medication usage in light of their experiences (A1) Provide instructions on use of tobacco dependence aids following discharge from hospital (A1) Where a patient chooses to do so, be confident in discussing their use of e- cigarettes (vapes), including the selection and use of these devices, as well as e-liquid strength
Documentation	Document clinical interaction and treatment plan	<ul style="list-style-type: none"> Demonstrate appropriate documentation of patient treatment plan (P1)

Follow-up support	Arrange for follow-up support for four weeks post-discharge	<ul style="list-style-type: none"> ▪ Be able to coordinate referral to available locally agreed follow-up pathway e.g. Local Authority Stop Smoking Service or community pharmacy (A5) ▪ Demonstrate ability to communicate information on follow-up support to patient (A5)
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Recommended training and skills assessment:

Recommended training has been developed by NHS England and the National Centre for Smoking Cessation and Training in line with these competencies and includes:

eLearning: Treating tobacco dependence in inpatient acute and mental health care	https://learninghub.nhs.uk/Catalogue/tobaccodependenceinpatienttraining
NHS Acute Inpatient Tobacco Dependence Adviser Training Resources	https://www.ncsct.co.uk/publications/category/inpatient-acute-training-resources

Recommended supplementary training:

Practitioner training – National Centre for Smoking Cessation and Training (NCSCT)	https://elearning.ncsct.co.uk/practitioner_training-registration
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Demonstrating competency: To demonstrate competency in the delivery of tobacco dependence interventions, NHS staff should:

- successfully complete online training and any associated assessment
- complete face-to-face skills training course
- observe the delivery of a tobacco dependence interventions from an experienced practitioner, and
- be observed conducting at least two tobacco dependence interventions and be provided with feedback on intervention delivery by an experienced practitioner.

Maintaining competency: The online or equivalent face-to-face course should be repeated at least once a year.

Additional training and resources: Below is a list of supplementary online training and print resources currently available to support staff in the delivery individual tobacco dependence interventions. Please note that these resources are developed by third parties and whilst all are experts in the field, they need to be read and implemented in the context of NICE guidelines.

Standard Treatment Plan for Inpatient Tobacco Dependence Treatment	Full document: https://www.ncsct.co.uk/publications/STP-inpatient-acute Clinical checklists: https://www.ncsct.co.uk/library/view/pdf/Inpatient-STP-checklists.pdf
Key messages and best practices: Inpatient tobacco dependence treatment	https://www.ncsct.co.uk/library/view/pdf/Inpatient-TD-best-practices-and-key-messages.pdf
‘Call to action’ films Tobacco dependence treatment: A new standard of care	https://www.ncsct.co.uk/publications/inpatient-acute-TDT-film
Tobacco Dependence Aids Quick Reference	https://www.ncsct.co.uk/library/view/pdf/NCsCT-tobacco-dependence-aids-quick-reference-v1.pdf
NCsCT secondary care factsheets	https://www.ncsct.co.uk/pub_secondary-care-resources.php
Top five myth busting tips on nicotine use for treatment of tobacco dependence in inpatient settings	https://www.ncsct.co.uk/publications/top-five-myth-busting-tips-on-nicotine-use
Nicotine replacement therapy (NRT)	https://www.ncsct.co.uk/publications/category/nrt
Varenicline	https://www.ncsct.co.uk/publications/category/varenicline
Cytisine (Cytisinicline)	https://www.ncsct.co.uk/publications/Cytisine-SPC

1.4 Post-discharge follow-up (Post Discharge Care Bundle)

Description: The post-discharge follow-up intervention involves follow-up telephone contact after discharge from hospital. The initial focus will be on the ongoing managing of tobacco withdrawal, followed by supporting long-term abstinence. Post-discharge follow-up support is delivered on an opt-out basis regardless of patient's interest in stopping long term. Follow-up contact should occur within 7-14 days and 28 days of discharge from hospital. Reassessment of patient's smokefree goals and ongoing offer of referral to locally available stop smoking support is a fundamental component of the intervention.

Responsible team: Hospital Tobacco Dependence Team or Community Stop Smoking Service (Transfer of Care).

Patient group: All patients who have been discharged from hospital, unless they opt out.

Intervention	Purpose	Competences
General communication and engagement	Engage patient in the development of their treatment plan	Demonstrate ability to: <ul style="list-style-type: none">▪ Describe to the patient and family members reason for post-discharge follow-up contact (BM1)▪ Establish rapport (RC1)▪ Enhance patient's motivation and self-efficacy for remaining smokefree and/or attempting to stop with support (BM2)▪ Communicate in an empathic and non-judgmental manner, using reflective listening and providing reassurance throughout (RC7 and RC10)▪ Elicit the patient's views and questions on smoking and tobacco dependence treatment, answering questions in a clear and accurate manner (RC2 and RC8)▪ Summarise information for patients and family (RC9)
Assessment	Assess patient response to treatment and smokefree goals	Demonstrate ability to: <ul style="list-style-type: none">▪ Assess smoking status▪ Reassess patient's smokefree goals▪ Assess medication / vape use and supply
Behavioural support	Provide brief behavioural support as appropriate	Demonstrate ability to: <ul style="list-style-type: none">▪ Provide personally relevant information on consequences of smoking and importance of stopping tailored to patient's medical condition (BM1)▪ Provide feedback and positive reinforcement about smokefree achievements (including

		<p>smokefree admission)</p> <ul style="list-style-type: none"> ▪ Discuss the transition from hospital to home, differences in cues and triggers to smoke, level of urges to smoke and withdrawal, etc. (BS1, BS7) ▪ Provide brief advice on strategies for coping with withdrawal symptoms and urges to smoke (BS1) ▪ Provide brief advice on coping with barriers, cues to smoke and relapse triggers and advise on changing routines (BS1, BS7) ▪ Prompt commitment from the patient to the treatment plan (BM6) ▪ Emphasise the importance of the 'not a puff' rule as appropriate (BM10) ▪ Deal appropriately with 'lapses' to minimise the likelihood that they will lead to full 'relapse' (BS2)
Support use of tobacco dependence aids	Promote effective use of tobacco dependence aids	<p>Demonstrate ability to:</p> <ul style="list-style-type: none"> ▪ Explain role of tobacco dependence aids in managing withdrawal symptoms / urges to smoke and supporting stopping long-term, and importance of compliance with full treatment course (A1) ▪ Assess patient's experience with using tobacco dependence aids, including usage, side effects and perceived benefits (A4) ▪ Advise patients appropriately on medication usage based of their experiences (A1) ▪ Provide instructions on use of tobacco dependence aids as appropriate (A1)
Support access to specialist stop smoking / TDT support	Advise patients on available support and refer to locally available specialist support as appropriate	<ul style="list-style-type: none"> ▪ For patients referred to specialist stop smoking / TDT support, assess if patient has engaged with service and any barriers ▪ Demonstrate ability to communicate to patients how treatment received in hospital is aligned with support from community services, including an accurate description of support that is on offer in community ▪ Demonstrate ability to deliver patient-centred advice and motivational interventions to support current or future access to available stop smoking support ▪ Provide brief advice on barriers to accessing support and alternatives ▪ Demonstrate ability to communicate information on available stop smoking / TDT support and benefits of using support (A5) ▪ Be able to coordinate referral to locally available and agreed follow-up pathway, e.g. Local Authority Stop Smoking Service or community pharmacy (A5)
Documentation	Document clinical interaction and treatment plan	<ul style="list-style-type: none"> ▪ Demonstrate appropriate documentation of patient record (P1) ▪ Demonstrate appropriate documentation in local and national reporting of patient contact and 28-day smoking status

Recommended training and skills assessment:

Recommended training has been developed by NHS England and the National Centre for Smoking Cessation and Training in line with these competencies and includes:

eLearning: Treating tobacco dependence in inpatient acute and mental health care	https://learninghub.nhs.uk/Catalogue/tobaccodependenceinpatienttraining.
NHS Acute Inpatient Tobacco Dependence Adviser Training Resources	https://www.ncsct.co.uk/publications/category/inpatient-acute-training-resources

Recommended supplementary training:

Practitioner training – National Centre for Smoking Cessation and Training (NCSCT)	https://elearning.ncsct.co.uk/practitioner_training-registration
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Demonstrating competency: In order to demonstrate competency in the delivery of tobacco dependence interventions, NHS staff should:

- successfully complete online training and any associated assessment
- complete face-to-face skills training course
- observe the delivery of a tobacco dependence intervention from an experienced practitioner, and
- be observed conducting at least two tobacco dependence interventions and be provided with feedback on intervention delivery by an experienced practitioner.

Maintaining competency: The online or equivalent face-to-face course should be repeated at least once a year.

Additional training and resources: Below is a list of supplementary online training and print resources currently available to support staff in the delivery individual tobacco dependence treatment interventions. Please note that these resources are developed by third parties and whilst all are experts in the field, they need to be read and implemented in the context of NICE guidelines.

Standard Treatment Plan for Inpatient Tobacco Dependence Treatment	Full document: https://www.ncsct.co.uk/publications/STP-inpatient-acute Clinical checklists: https://www.ncsct.co.uk/library/view/pdf/Inpatient-STP-checklists.pdf
Key messages and best practices: Inpatient tobacco dependence treatment	https://www.ncsct.co.uk/library/view/pdf/Inpatient-TD-best-practices-and-key-messages.pdf
‘Call to action’ films Tobacco dependence treatment: A new standard of care	Acute (Medical) Trusts: https://www.ncsct.co.uk/publications/inpatient-acute-TDT-film
Tobacco Dependence Aids Quick Reference	https://www.ncsct.co.uk/library/view/pdf/NCsCT-tobacco-dependence-aids-quick-reference-v1.pdf
NCsCT secondary care factsheets	https://www.ncsct.co.uk/pub_secondary-care-resources.php
Top five myth busting tips on nicotine use for treatment of tobacco dependence in inpatient settings	https://www.ncsct.co.uk/publications/top-five-myth-busting-tips-on-nicotine-use
Nicotine replacement therapy (NRT) – Electronic Medicine Compendium	https://www.medicines.org.uk/emc/search?q=nicotine
Varenicline	https://www.ncsct.co.uk/publications/category/varenicline
Cytisine (Cytisinicline)	https://www.ncsct.co.uk/publications/Cytisine-SPC

1.5 Leadership

Description: Administrative and clinical leadership have a fundamental role to play in supporting the success of the NHS plan to deliver evidence-based tobacco dependence support to all inpatients. This includes responsibilities for: facilitating the introduction of the necessary policies and processes to support the delivery of tobacco dependence interventions in hospitals and hospital units; ensuring NHS staff are motivated, have the competences (knowledge and skills) and opportunity to deliver the clinical service (VBA and tobacco dependence interventions) to inpatients; and monitoring delivery of the intervention against established benchmarks. Moreover, leadership has an important role to play in establishing the supportive culture required for the delivery of evidence-based tobacco dependence support as a new standard of care.

Staff group: Administrative and clinical leadership at all levels of the hospital.

Patient group: All inpatients.

Activity	Purpose	Competences
Culture, communication, staff engagement	Demonstrate knowledge of the importance of addressing tobacco use in the inpatient setting Engage clinical teams in the delivery of evidence-based tobacco dependence treatment interventions to patients	<ul style="list-style-type: none">▪ Demonstrate an understanding of how the NHS goals related to delivering tobacco dependence interventions to all inpatients contribute to hospital performance targets and the success of the NHS Long Term Plan▪ Demonstrate an understanding of the importance of addressing tobacco use among inpatients and managing tobacco withdrawal▪ Understand what is involved in the delivery of VBA and the tobacco dependence treatment care bundles▪ Establish the importance within clinical teams of early management of tobacco withdrawal to support temporary abstinence (not smoking while in hospital) and ideally stopping smoking long-term▪ Oversee that staff are informed about hospital and clinical leadership's commitment to this new standard of care▪ Identify clinical and administrative leads / champions who will have the lead role in supporting tobacco dependence treatment
Managing services	Support planning for service delivery	<ul style="list-style-type: none">▪ Identification of responsible unit staff who will deliver VBA and tobacco dependence interventions

	<p>Ensure timely, high-quality delivery of VBA and tobacco dependence interventions</p> <p>Ensure patient safety</p>	<ul style="list-style-type: none"> ▪ Ensure timely access to tobacco dependence aids for managing tobacco withdrawal ▪ Ensure timely delivery of VBA and tobacco dependence interventions ▪ Identification of the documentation processes to be used to record delivery of VBA and tobacco dependence interventions ▪ Oversee that mentorship and on-the-job training is provided to staff to improve service quality ▪ Oversee that feedback on performance is provided to staff
Training	<p>Ensure staff have the knowledge and skills to deliver service</p>	<ul style="list-style-type: none"> ▪ Ensure all frontline staff complete the appropriate training and have met basic competences for the delivery of VBA ▪ Ensure staff who will be delivering specialist tobacco dependence interventions have completed the appropriate training and have the competences required to conduct the bedside intervention ▪ Be able to coordinate access for staff to annual refresher training and assessment
Monitoring	<p>Monitor performance against established benchmarks</p>	<ul style="list-style-type: none"> ▪ Understand who is / is not engaging with services and proactively look to improve both access and outcomes – especially in groups with high level of health inequalities ▪ Conduct service audit to improve service delivery ▪ Seek feedback from staff on service delivery ▪ Seek feedback from patients and family on service delivery
Quality improvement	<p>Conduct service review to ensure high quality service delivery</p>	<ul style="list-style-type: none"> ▪ Identify areas of poor / reduced performance ▪ Identify factors responsible for poor / reduced performance ▪ Engage staff in problem-solving ▪ Introduce quality improvement cycles to address areas of poor / reduced performance

Recommended training and skills assessment: it is key that leaders understand the roles being undertaken and it is recommended to undertake the e-learning “*Treating tobacco dependence in inpatient acute and mental health care*”. This training can be accessed via the NHS Learning Hub: <https://learninghub.nhs.uk/Catalogue/tobaccodependenceinpatienttraining>.

Demonstrating competency: In order to demonstrate competency, leadership should:

- be familiar with the NHS Tobacco Dependence Treatment Care Bundles and Standard Treatment Plan

- successfully complete the online training including assessment, and
- observe the delivery of VBA and specialist tobacco dependence interventions from a trained colleague.

Maintaining competency: The online or equivalent face-to-face training should be repeated at least once a year.

Additional training and resources: Below is a list of supplementary online training and print resources currently available to support competencies.

Standard Treatment Plan for Inpatient Tobacco Dependence Treatment	Full document: https://www.ncsct.co.uk/publications/STP-inpatient-acute Clinical checklists: https://www.ncsct.co.uk/library/view/pdf/Inpatient-STP-checklists.pdf
Key messages and best practices: Inpatient tobacco dependence treatment	https://www.ncsct.co.uk/library/view/pdf/Inpatient-TD-best-practices-and-key-messages.pdf
'Call to action' films Tobacco dependence treatment: A new standard of care	Acute (Medical) Trusts: https://www.ncsct.co.uk/publications/inpatient-acute-TDT-film
NCSCT secondary care factsheets	https://www.ncsct.co.uk/pub_secondary-care-resources.php
Top five myth busting tips on nicotine use for treatment of tobacco dependence in inpatient settings	https://www.ncsct.co.uk/publications/top-five-myth-busting-tips-on-nicotine-use