

1. Competency framework for tobacco dependence treatment: pregnant and post-partum women

Introduction

The NHS Long Term Plan has committed to delivering tobacco dependence treatment to all inpatients, pregnant women, long-term users of specialist mental health and learning disability services those in long term. Frontline staff will need to be upskilled to be able to provide these interventions, and NHS England and NHS Improvement (NHSE&I) have commissioned a series of competency frameworks to support the training and development of staff.

This document describes the competences required to successfully deliver:

1. Very brief advice on smoking (VBA) for pregnant women
2. Stop smoking intervention for pregnant women
3. Leadership

It should be noted that while the NHS Long Term Plan commitments referred to ensuring tobacco dependence treatment services are accessible to pregnant women, best practice would see the competences also applied to post-partum care to ensure continued support to the woman and child.

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 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.

The decision on competence for prescribing stop smoking medications 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 stop smoking medications* (Appendix C).

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

1.1 Very brief advice on smoking (VBA) for pregnant and post-partum women

Description: Very brief advice on smoking (VBA) is an evidence-based intervention proven to prompt quit attempts. It is designed to be delivered to all pregnant women seen in both inpatient and outpatient settings. VBA involves establishing the smoking status of all pregnant and post-partum women, advising on the best method of stopping for women who are current or recent smokers, and acting to support stopping by referring women to specialist tobacco dependence treatment services.

Staff group: All NHS staff who have contact with pregnant and post-partum women.

Patient group: Pregnant and post-partum women. Family members of pregnant and post-partum women.

Behaviour Change Techniques: Behaviour Change Techniques (BCTs) to support the delivery of VBA 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).

Stop smoking (tobacco dependence) intervention	Purpose	Patient group	Competences (BCT code)
General	Demonstrate adequate knowledge about the effects of smoking in pregnancy and nicotine dependence	All pregnant and post-partum women	<ul style="list-style-type: none"> • Demonstrate an understanding of how smoking affects pregnancy, fetus and new born baby (BM1) • Demonstrate an understanding of how tobacco dependence develops and knowledge of nicotine withdrawal symptoms (RC6)

			<ul style="list-style-type: none"> • Demonstrate ability to address myths and concerns about stopping smoking in pregnancy • Be familiar with latest guidance on stop smoking medications and use of e-cigarettes (vapes) in pregnancy
Communication skills	Demonstrate ability to effectively communicate with pregnant and post-partum women who smoke	All pregnant and post-partum women	<ul style="list-style-type: none"> • Build rapport (RC1) • Communicate in an empathic and non-judgmental manner, using reflective listening and providing reassurance throughout (RC7 and RC10) • Demonstrate ability to boost patient motivation and self-efficacy (BM2) • Demonstrate ability to appropriately tailor interactions with women (RD1)
Ask	<p>Establish and document smoking status</p> <p>Identify pregnant smokers using carbon monoxide (CO) testing and responding appropriately</p>	All pregnant and post-partum women	<ul style="list-style-type: none"> • Demonstrate ability to assess and record current and past smoking behaviour including use of e-cigarettes (vapes) (R11) • 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 CO testing to women • Demonstrate the ability to ask about significant others who smoke and assess exposure to second-hand smoke
Advise	Motivate quit attempt and inform of available support	All pregnant and post-partum women who report current smoking or who report stopping in the past two weeks	<ul style="list-style-type: none"> • Be able to effectively advise women and visitors that the hospital is a smokefree site and that help is available to both manage not being able to smoke whilst attending outpatient appointments or whilst in hospital (temporary abstinence) and to assist with a quit attempt • Advise women on the effect of smoking on themselves and their baby • Advise women on tobacco dependence and withdrawal symptoms (RC6)

			<ul style="list-style-type: none"> • 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) • Demonstrate ability to inform women and partners of what help is available including nicotine replacement therapy (NRT) and specialist support (A5) • Where women choose to use them, be able to advise on use of e-cigarettes (vapes) in line with NICE guidance <p>Clinical staff</p> <ul style="list-style-type: none"> • Be confident in advising women about the role of NRT to support quitting among pregnant women who are unable or unlikely to stop on their own (A1)
Act	An opt-out referral of the pregnant women who smoke/recent quitters to the local maternity tobacco dependence treatment service	All pregnant and post-partum women who report current smoking or who report stopping in the past 28 days	<p>All staff</p> <ul style="list-style-type: none"> • Be aware of process for referring women to stop smoking support, including the NHS opt-out referral model (A5) • Be aware of process for documenting what action has been agreed in patient notes (P1) • Be aware of process to follow if patient does not want any support at this time (A5)
Act	Record smoking status	All pregnant women	<ul style="list-style-type: none"> • Demonstrate awareness of proper recording of smoking status at: <ul style="list-style-type: none"> ○ time of booking (SATOB); ○ the 28 quit ○ 36 weeks; and ○ time of delivery (SATOD)

Recommended training and skills assessment: The recommended training for these competences is covered by the relevant sections of the e-LFH “Smoking in Pregnancy Educational Series”, depending on the profession of the maternity care worker or the area of practice. eLearning is also being produced by NHS England and NHS Improvement in line with these competencies. It will be shared on the [Community of Practice](#) platform, and providers can refer to it as an additional resource to those already supplied.

e-LFH Smoking in Pregnancy Programme (12-part online training)	https://www.e-lfh.org.uk/programmes/smoking-in-pregnancy/
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In order to demonstrate competency in the delivery of VBA, staff should:

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

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

Additional training and resources: Listed below are supplementary online training and print resources currently available to support staff in the delivery of VBA to pregnant and post-partum women. 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.

Stopping smoking in pregnancy: a briefing for maternity care providers – NCSCCT	https://www.ncsct.co.uk/publication_briefing_for_midwifery_staff.php
Smoking and reproduction fact sheet – Action on Smoking and Health (ASH)	https://ash.org.uk/wp-content/uploads/2019/10/Smoking-Reproduction.pdf
Carbon monoxide screening: advice for health professionals – The Smoking in Pregnancy Challenge Group	https://smokefreeaction.org.uk/wp-content/uploads/2017/06/38830CO2screening.pdf
Smoking in pregnancy: carbon monoxide screening and “very brief advice” – The Smoking in Pregnancy Challenge Group	https://smokefreeaction.org.uk/smokefree-nhs/smoking-in-pregnancy-challenge-group/smoking-in-pregnancy-challenge-group-resources/carbon-monoxide-screening/
Use of electronic cigarettes before, during and after pregnancy: A guide for maternity and other health care professionals – The Smoking in Pregnancy Challenge Group	https://smokefreeaction.org.uk/wp-content/uploads/2019/08/2019-Challenge-Group-ecigs-briefing-FINAL.pdf

Use of electronic cigarettes before, during and after pregnancy: Key messages for health professionals working with pregnant women and their babies – The Smoking in Pregnancy Challenge Group

https://smokefreeaction.org.uk/wp-content/uploads/2019/07/2019-Challenge-Group-ecig-summary_A5_FINAL.pdf

1.2 Stop smoking intervention

Description: The tobacco dependence intervention involves the appropriate assessment of pregnant and post-partum women who smoke, and the delivery of evidence-based stop smoking support, including behavioural support and nicotine replacement therapy (NRT). After identification of the woman’s smoking status, through the use of CO testing, the intervention will take the form of an initial consultation to establish the woman’s stop smoking treatment plan with follow-up consultations conducted to monitor and adjust the plan as needed. Treatment will be delivered on an opt-out basis.

Staff group: Staff responsible for delivering individual tobacco dependence interventions to pregnant and post-partum women.

Patient group: All pregnant and post-partum women who report current smoking or have stopped smoking in the past 4 weeks. While NICE guidance suggests offering support to pregnant women who have smoked in the last two weeks, as part of the Long Term Plan commitments, the delivery models extends this to 28 days to ensure that more women are provided support. Additionally, we would recommend that any woman who has quit smoking since conception is offered support as part of good clinical practice.

Behaviour Change Techniques: Behaviour Change Techniques (BCTs) to support the delivery of VBA 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).

Stop smoking (tobacco dependence) intervention	Purpose	Competences
General communication and engagement	Engage women in the development of their treatment plan	Demonstrate ability to: <ul style="list-style-type: none"> • Describe to pregnant women and family members what to expect from the stop smoking intervention (BM1) • Enhance the woman’s motivation and confidence in their ability to quit (BM2) • Build rapport (RC1) • Communicate in an empathic and non-judgmental manner, using reflective listening and providing reassurance throughout (RC7 and RC10)

		<ul style="list-style-type: none"> • Elicit the woman's views and questions on smoking and smoking cessation, answering questions in a clear and accurate manner (RC2 and RC8) • Summarise information for women (RC9) • Be familiar with latest evidence-based practices for supporting smoking cessation during pregnancy
Assessment	Conduct assessment of woman's needs in order to develop tailored treatment plan	<p>Demonstrate ability to:</p> <ul style="list-style-type: none"> • Assess the woman's understanding of health consequences of smoking in pregnancy to them and their baby • Assess current and past smoking behaviour including level of tobacco dependence (R11) • Assess significant others who smoke and exposure to second-hand smoke • Assess commitment, readiness and ability to stop smoking (R12) • Assess past history of quit attempts (R13) • Assess physical and mental functioning (R10) • Demonstrate appropriate conduct of carbon monoxide (CO) testing and explain results to women (BM11)
Behavioural support	Deliver evidence-based stop smoking support	<p>Demonstrate ability to:</p> <ul style="list-style-type: none"> • Develop a personal treatment plan and set a quit date with pregnant women who smoke (BS3) • Provide personally relevant information on consequences of smoking in pregnancy and overall health (BM1) • Provide information on nicotine addiction, withdrawal symptoms and the quitting process (RC6) • Emphasise the importance of the 'not a puff' rule (BM10) • Ability to explain role of CO testing in pregnancy and support its use as a motivational intervention (RC3) • Help women develop strategies to cope with barriers, cues to smoke and relapse triggers, and advise on changing routine (BS1, BS7) • Facilitate and advise on use of social support (from friends, relatives, colleagues and 'buddies') (A2)

		<ul style="list-style-type: none"> • Prompt commitment from the woman to the treatment plan and 'not a puff' rule (BM6) • Deal appropriately with 'lapses' to minimise the likelihood that they will lead to full 'relapse' (BS2) and facilitate relapse prevention and coping (BS2) • Offer/direct towards written support materials (RC5) • Inform women and partners what local support is available to partners/other members of the household to help them stop smoking
Prescribe and/or dispense stop smoking medication	To promote effective medication use	<p>Demonstrate ability to:</p> <ul style="list-style-type: none"> • Explain the role of NRT in supporting quitting among pregnant women unable to quit or unlikely to quit on their own (A1) • Assess women's past experience with using NRT (A1) • Provide instruction on correct use and dosage of NRT including combination therapy (A1) • Facilitate access to NRT (cost-free where available) using local pathways (A3) • Advise patients appropriately on adjusting medication usage in the light of their experiences (A1) • Where a woman chooses to do so, be confident in discussing her use of e-cigarettes (vapes) with women including the selection and use of these devices, plus e-liquid strength
Documentation	Document clinical interaction and treatment plan	<ul style="list-style-type: none"> • Demonstrate appropriate documentation of treatment plan (P1)
Follow-up support (inpatients only)	Arrange for follow-up support for at least 1-month post-discharge	<ul style="list-style-type: none"> • Be able to coordinate an opt-out referral to available antenatal / community based stop smoking support (A5) • Demonstrate ability to communicate information on antenatal / community based stop smoking support to patient (A5)

Recommended training and skills assessment:

The required training for this competency is the [NCSCT Pregnancy and the Post-partum period specialty module](#). In addition, staff can also refer to the e-LFH Smoking in Pregnancy online training below. Further eLearning is being produced by NHS England and NHS Improvement in line with these competencies and will be shared on the [Community of Practice](#). To note, while this recommended eLearning covers the

core elements to enable staff to deliver tobacco dependence treatment services, training will also need to be supplemented by local training on local pathways and processes.

e-LFH Smoking in Pregnancy (12-part online training)	https://www.e-lfh.org.uk/programmes/smoking-in-pregnancy/
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In order to demonstrate competency in the delivery of the stop smoking intervention, NHS staff should:

- successfully complete the 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 with feedback provided.

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 of individual stop smoking 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.

Online training

Smoking in Pregnancy Challenge Group Webinar - Health visiting and relapse prevention	https://www.youtube.com/watch?v=lyyuHUiukpA
Smoking in Pregnancy Challenge Group Webinar – Nicotine in pregnancy	https://www.youtube.com/watch?v=0FkQ6XA0DCs

Online and Print resources

Standard Treatment Program for Pregnant Women – NCSCT [Note: this can be made available for hosting on e-LFH]	https://www.ncsct.co.uk/publication_ncsct_stp_pw.php
Stopping smoking in pregnancy: a briefing for maternity care providers – NCSCT [Note: this can be made available for hosting on e-LFH]	https://www.ncsct.co.uk/publication_briefing_for_midwifery_staff.php

Smoking and reproduction fact sheet - Action on Smoking and Health (ASH)	https://ash.org.uk/wp-content/uploads/2019/10/Smoking-Reproduction.pdf
Carbon monoxide screening: advice for health professionals – The Smoking in Pregnancy Challenge Group	https://smokefreeaction.org.uk/wp-content/uploads/2017/06/38830CO2screening.pdf
Smoking in pregnancy: carbon monoxide screening and “very brief advice” – The Smoking in Pregnancy Challenge Group	https://smokefreeaction.org.uk/smokefree-nhs/smoking-in-pregnancy-challenge-group/smoking-in-pregnancy-challenge-group-resources/carbon-monoxide-screening/
Use of electronic cigarettes before, during and after pregnancy: A guide for maternity and other health care professionals – The Smoking in Pregnancy Challenge Group	https://smokefreeaction.org.uk/wp-content/uploads/2019/08/2019-Challenge-Group-ecigs-briefing-FINAL.pdf
Use of electronic cigarettes before, during and after pregnancy: Key messages for health professionals working with pregnant women and their babies – The Smoking in Pregnancy Challenge Group	https://smokefreeaction.org.uk/wp-content/uploads/2019/07/2019-Challenge-Group-ecig-summary_A5_FINAL.pdf

1.3 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 (stop smoking) treatment support to all pregnant women. This includes responsibilities for: supporting the introduction of policies and processes for the delivery of tobacco dependence interventions in inpatient and outpatient (antenatal) settings; ensuring that NHS staff are motivated, have the competences (knowledge and skills) and opportunity to deliver the clinical service (VBA and tobacco dependence intervention); and monitoring delivery of the intervention against established benchmarks. Moreover, leadership will have 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 in maternity care settings.

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

Patient group: All pregnant and post-partum women.

Activity	Purpose	Competences
Culture, communication, staff engagement	<p>To demonstrate knowledge of the importance of addressing tobacco use among pregnant and post-partum women</p> <p>To engage clinical teams in the delivery of evidence-based smoking cessation interventions to pregnant and post-partum women</p>	<ul style="list-style-type: none"> • Demonstrate an understanding of NHS goals related to delivering tobacco dependence interventions to pregnant and post-partum women and how they contribute to organisational performance targets and the success of the NHS Long Term Plan • Demonstrate an understanding of the importance of addressing tobacco use among inpatients and outpatients • Understand what is involved in the delivery of VBA and the stop smoking intervention • For inpatient admission, engage clinical teams in understanding the importance of managing nicotine withdrawal and supporting patients with not being able to smoke whilst in hospital (temporary abstinence) and/or stopping smoking • 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 smoking cessation

Managing services	Support planning for service delivery Ensure timely, high quality delivery of VBA and stop smoking interventions	<ul style="list-style-type: none"> • Identification of responsible unit staff who will deliver VBA and tobacco dependence interventions • Ensure timely access to stop smoking medications for managing nicotine withdrawal • Ensure timely delivery of VBA and tobacco dependence interventions • Identification of the documentation processes to be used to record the delivery of VBA intervention and tobacco dependence interventions • Oversee that mentorship and on-the-job training are provided to staff to improve service quality • Oversee that feedback on performance is provided to staff
Training	Ensure staff have the knowledge and skills to deliver service	<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 intervention • Be able to coordinate access for staff to annual refresher training and assessment
Monitoring	Monitor performance against established benchmarks	<ul style="list-style-type: none"> • Understand who is engaging and not engaging with services and proactively look to improve both access and outcomes – especially in groups with a 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	Conduct service review to ensure high quality service delivery	<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 associated learning via e-LFH Smoking in Pregnancy Educational Series. Additional eLearning is being produced by NHS England and NHS Improvement in line with these competencies and will be shared on the [Community of Practice](#).

Additional training and resources: Below is a list of supplementary online training and print resources currently available to support staff in the delivery of VBA to pregnant and post-partum women. 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.

NICE Guidance PH26: Smoking: stopping in pregnancy and after childbirth – National Institute for Health and Care Excellence (NICE). NB. This guidance is due to be updated in 2021, so please ensure you are referring to the latest version.	https://www.nice.org.uk/guidance/ph26
Review of the Challenge 2018 – The Pregnancy Challenge Group	https://ash.org.uk/information-and-resources/reports-submissions/reports/smoking-in-pregnancy-challenge-group-review-of-the-challenge-2018/
Stopping smoking in pregnancy: a briefing for maternity care providers – National Centre for Smoking Cessation and Training (NCSCT)	https://www.ncsct.co.uk/publication_briefing_for_midwifery_staff.php
Smoking and reproduction fact sheet: Action on Smoking and Health (ASH)	https://ash.org.uk/wp-content/uploads/2019/10/Smoking-Reproduction.pdf