

1. Competency framework for tobacco dependence treatment: mental health services

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. 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)
2. Stop smoking intervention
3. Leadership

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 competence.

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 mental health service users

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** patients seen in inpatient, outpatient or community settings. VBA involves establishing smoking status of all patients, advising on the best method of stopping for those patients who report recent smoking and referring patients to specialist stop smoking support. This could be an in-house NHS tobacco dependence treatment service or a local authority commissioned Stop Smoking Service.

Staff group: All NHS staff who have contact with mental health service users.

Patient group: Mental health service users in both inpatient and outpatient settings. Families and carers where appropriate.

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 smoking and nicotine dependence	All mental health service users	<ul style="list-style-type: none"> • Demonstrate an understanding of impact of smoking on mental health and benefits of stopping smoking • Demonstrate an understanding of consequences of smoking and benefits of smoking cessation to patient's overall health with a focus on smoking related co-morbidities (BM1) • Demonstrate an understanding of how tobacco dependence develops and knowledge of nicotine withdrawal symptoms (RC6) • Demonstrate ability to boost patient's motivation and self-efficacy (BM2)

			<ul style="list-style-type: none"> • Demonstrate ability to appropriately tailor interactions to patients with mental health conditions including short-term planning and more frequent follow-up (RD1) • Be familiar with first line stop smoking medications and guidance on the use of e-cigarettes (vapes)
Ask	Establish and document smoking status	All mental health service users	<ul style="list-style-type: none"> • Demonstrate ability to assess and record current and past smoking behaviour including use of e-cigarettes (vapes) (RI1)
Advise	Motivate quit attempt and inform of support available	All mental health service users who report current smoking or who have recently quit (within the past four weeks)	<ul style="list-style-type: none"> • Be able to provide personally relevant information on consequences of smoking, benefits of smoking cessation and on withdrawal symptoms (BM1 and RC6) • Demonstrate ability to inform patient of what help is available (A5) <p>Inpatients:</p> <ul style="list-style-type: none"> • 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
Act	Act on patient's response to Advise	All mental health service users who report current smoking or have recently quit (within the past four weeks)	<p>Clinical staff</p> <ul style="list-style-type: none"> • Be familiar with the contraindications and special considerations for first line stop smoking medications • Be able to instruct patients on correct use of stop smoking medications (nicotine replacement therapy (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. • For inpatient settings: Be confident in initiating NRT to manage withdrawal from tobacco within 48 hours of

			<p>admission based on patient’s level of nicotine dependence (A1)</p> <ul style="list-style-type: none"> • Be aware of process for arranging an opt-out tobacco dependence consultation with the tobacco dependence treatment practitioner (A5) <p>All staff</p> <ul style="list-style-type: none"> • Be able to discuss preparing for admission to a smokefree setting with patients who smoke, 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 tobacco dependence treatment either in-house or with a stop smoking service (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)
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Recommended training and skills assessment: The recommended training for this competency is the e-LFH ‘Introduction to treating and preventing ill health by risky behaviours – tobacco and alcohol’ and “Very Brief Advice on Smoking”. This training can be accessed at <https://portal.e-lfh.org.uk/register>. Whilst not specifically designed mental health services, the knowledge and the principles are transferable, although they may need to be adapted by mental health staff. Additional eLearning is being produced by NHSEI in line with these competencies and will be shared on the Community of Practice.

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.

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. 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.

What are the clinically significant drug interactions with cigarette smoking? (NCSCT)	https://elearning.ncsct.co.uk/usr/docs/UKMI_QA_Drug-interactions-with-smoking-cigarettes_update_Nov-2017.pdf
Mental health and smoking cessation - National Centre for Smoking Cessation and Training (NCSCT)	https://elearning.ncsct.co.uk/mental_health_specialty_module
Smoking cessation and mental health: A briefing for frontline staff (NCSCT)	https://www.ncsct.co.uk/publication_Smoking_cessation_and_Mental_Health_briefing.php
Smoking and mental health fact sheet: Action on Smoking and Health (ASH)	https://ash.org.uk/information-and-resources/fact-sheets/health/smoking-and-mental-health/
Health matters: smoking and mental health (PHE)	https://www.gov.uk/government/publications/health-matters-smoking-and-mental-health/health-matters-smoking-and-mental-health
Use of electronic cigarettes by people with mental health problems (ASH)	https://smokefreeaction.org.uk/wp-content/uploads/2020/03/MHSP-ecig-briefing-2020-v2.pdf

1.2 Tobacco dependence intervention

Description: The tobacco dependence (stop smoking) intervention involves the appropriate assessment of mental health patients who smoke and the delivery of evidence-based stop smoking support, including behavioural support and stop smoking medication. For inpatients, the intervention will require identification of smokers and an opt-out referral to a tobacco dependence practitioner. During the initial consultation, the practitioner will establish the patient's tobacco dependence treatment plan with follow-up consultations conducted to monitor and adjust the plan as needed. For outpatient services, when a smoker is identified and referred to support (either in-house or a local authority commissioned Stope Smoking Service), the intervention will take the form of an initial consultation to establish the patient's treatment plan with follow-up consultations conducted to monitor and adjust the plan as needed.

For mental health service users, in particular those with severe mental health illness, more intensive support is recommended as best practice.

Staff group: Staff responsible for delivering individual tobacco dependence interventions.

Patient group: All mental health service users who report current smoking or who have quit within the past four weeks.

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 patient in the development of their treatment plan	Demonstrate ability to: <ul style="list-style-type: none"> • Describe to patients and family members what to expect from the tobacco dependence 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 and RC10) • Elicit the patient’s views and questions on smoking and smoking cessation, answering questions in a clear and accurate manner (RC2 and RC8) • Summarise information (RC9) • Demonstrate ability to tailor interactions to patients with mental health conditions appropriately (RD1) • Be familiar with latest evidence-based practices for supporting smoking cessation among mental health service uses • Inform partners, carers and/or family members of risks of smoking and what local support is available to help them stop smoking

Assessment	Conduct assessment of patient needs in order to develop tailored treatment plan	<p>Demonstrate ability to:</p> <ul style="list-style-type: none"> • Assess current and past smoking behaviour including level of tobacco dependence (R11) • Assess commitment, readiness and ability to stop smoking (R12) • Assess past history of quit attempts (R13)
Behavioural support	Deliver evidence-based stop smoking support to patients	<p>Demonstrate ability to:</p> <ul style="list-style-type: none"> • Develop a personal treatment plan (BS3) • 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) • 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 • Emphasise the importance of the ‘not a puff’ rule (BM10) • Help patients develop strategies to cope with barriers, cues to smoke and relapse triggers (BS1) • Facilitate and advise on use of social support (from friends, relatives, colleagues and ‘buddies’) (A2) • Prompt commitment from the patient to treatment plan and ‘not a puff’ rule (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 stop smoking medication	Promote effective medication use	<p>Demonstrate ability to:</p> <ul style="list-style-type: none"> • 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 (A3) • Provide instructions on correct use and dosage of stop smoking medications (A1)

		<ul style="list-style-type: none"> • 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) • Where a patient chooses to do so, be confident in discussing their use of e-cigarettes (vapes) with patients, 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)

Required training and skills assessment: The recommended training for this competency is the e-LFH ‘Introduction to treating and preventing ill health by risky behaviours – tobacco and alcohol’ and “Very Brief Advice on Smoking”. This training can be accessed at <https://portal.e-lfh.org.uk/register>. Whilst not specifically designed mental health services, the knowledge and the principles are transferable, although they may need to be adapted by mental health staff. Additional eLearning is being produced by NHSEI in line with these competencies and will be shared on the Community of Practice. You may also wish to refer to the additional resources table below.

In order to demonstrate competency in the delivery of the stop smoking intervention, NHS staff should:

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

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 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.

South Yorkshire and Bassetlaw QUIT Programme Training: eLearning modules on mental health inpatient pathways	https://sybics-quit.co.uk/healthcare-professionals/training
Mental health specialty module - National Centre for Smoking Cessation and Training (NCSCT)	https://www.ncsct.co.uk/publication_MH_specialty_module.php
What are the clinically significant drug interactions with cigarette smoking?	https://elearning.ncsct.co.uk/usr/docs/UKMI_QA_Drug-interactions-with-smoking-cigarettes_update_Nov-2017.pdf
Smoking cessation and mental health: A briefing for frontline staff (NCSCT)	https://www.ncsct.co.uk/publication_Smoking_cessation_and_Mental_Health_briefing.php
Smoking cessation and smokefree policies – Good practice for mental health services - National Centre for Smoking Cessation and Training (NCSCT)	https://www.ncsct.co.uk/usr/pub/Smoking%20cessation%20and%20smokefree%20policies%20-%20Good%20practice%20for%20mental%20health%20services.pdf
Smoking and mental health fact sheet: Action on Smoking and Health (ASH)	https://ash.org.uk/information-and-resources/fact-sheets/health/smoking-and-mental-health/
Health matters: smoking and mental health (PHE)	https://www.gov.uk/government/publications/health-matters-smoking-and-mental-health/health-matters-smoking-and-mental-health
Use of electronic cigarettes by people with mental health problems (ASH)	https://smokefreeaction.org.uk/wp-content/uploads/2020/03/MHSP-ecig-briefing-2020-v2.pdf
Mental Health Smoking Partnership resources	https://smokefreeaction.org.uk/smokefree-nhs/smoking-and-mental-health/mhspresources/
Smokefree Skills: Training needs of mental health nurses and psychiatrists (ASH)	https://ash.org.uk/information-and-resources/reports-submissions/reports/smokefreeskills/

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 treatment to all mental health inpatient service users and long term users in outpatient settings. This includes responsibilities for: supporting the introduction of policies and processes for the delivery of tobacco dependence interventions within mental health services; ensuring that NHS staff are motivated to deliver support, 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 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 for mental health users.

Staff group: Administrative and clinical leadership.

Patient group: Mental health service users in both inpatient and outpatient settings.

Activity	Purpose	Competences
Culture, communication, staff engagement	Demonstrate knowledge of the importance of addressing tobacco use among mental health service users Engage clinical teams in the delivery of evidence-based smoking cessation interventions to patients	<ul style="list-style-type: none"> • Demonstrate an understanding of how the NHS goals related to delivering tobacco dependence interventions contribute to organisational performance targets and the success of the NHS Long Term Plan • Demonstrate an understanding of benefits of stopping smoking among mental health service users • Demonstrate understanding of tobacco dependence, nicotine withdrawal and cravings • Understand what is involved in the delivery of VBA and the stop smoking intervention • Engage clinical teams in understanding the importance of managing nicotine withdrawal and temporary abstinence (not smoking while in facility) during admissions and ideally stopping smoking • Oversee that staff are informed about administrative 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	<p>Support planning for service delivery</p> <p>Ensure timely, high quality delivery of VBA and stop smoking interventions</p> <p>Ensuring patient safety</p>	<ul style="list-style-type: none"> • Identification of responsible 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 and tobacco dependence interventions • Oversee that mentorship and that 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 services</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 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 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	<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 associated e-LFH e-learning ‘Introduction to treating and preventing ill health by risky behaviours – tobacco and alcohol’ and “Very Brief Advise on Smoking”. This training can be accessed at <https://portal.e-lfh.org.uk/register>

Additional training and resources: Below is a list of supplementary online training and print resources currently available to support staff in the delivery individual stop smoking interventions.

Smoking cessation and smokefree policies – Good practice for mental health services – National Centre for Smoking Cessation and Training (NCSCT)	https://www.ncsct.co.uk/usr/pub/Smoking%20cessation%20and%20smokefree%20policies%20-%20Good%20practice%20for%20mental%20health%20services.pdf
Smoking and mental health fact sheet: Action on Smoking and Health (ASH)	https://ash.org.uk/information-and-resources/fact-sheets/health/smoking-and-mental-health/
Health matters: smoking and mental health (PHE)	https://www.gov.uk/government/publications/health-matters-smoking-and-mental-health/health-matters-smoking-and-mental-health
Use of electronic cigarettes by people with mental health problems (ASH)	https://smokefreeaction.org.uk/wp-content/uploads/2020/03/MHSP-ecig-briefing-2020-v2.pdf
Mental Health Smoking Partnership resources	https://smokefreeaction.org.uk/smokefree-nhs/smoking-and-mental-health/mhspresources/
Smokefree Skills: Training needs of mental health nurses and psychiatrists (ASH)	https://ash.org.uk/information-and-resources/reports-submissions/reports/smokefreeskills/