Competency Framework for Stop Smoking Practitioners



Introduction

This document describes the competences (knowledge and skills) required by stop smoking practitioners for the delivery of evidence-based stop smoking support. The competences look to address capability, opportunity and motivation as presented in the COM-B model of behaviour: www.qeios.com/read/WW04E6

This framework outlines the individual competences required to deliver **core** stop smoking support and **advanced** stop smoking support. The advanced competences have been identified to ensure that the support and treatment of clients with multiple additional needs can be met.

While some services may use the competency framework to support professional development, career progression and promotion, delivery of the interventions is not restricted by role or grade but rather determined by the competences attained through training, experience and supervision. The competences described in the framework are applicable to local authority and partnership staff at differing grades.

Community stop smoking practitioners (i.e. people whose main job is something other than providing stop smoking support) typically require the core competences and specialist stop smoking practitioners (i.e. people whose main job is delivering stop smoking support) require the core *and* advanced competences. This competency framework is not intended to be restrictive as there may be staff in either role who require some advanced competences.

Version 1. Last update: August 2025

Stop Smoking Practitioner Knowledge Competences

The table below describes the **knowledge competences** that underpin stop smoking interventions.

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

Tobacco dependence knowledge

Smoking in the population	
Stop Smoking Practitioner core knowledge competences	Stop Smoking Practitioner advanced knowledge competences (in addition to core knowledge competences)
 describe prevalence and patterns of smoking and stopping smoking as functions of demographic characteristics such as gender, age, ethnicity and socio-economic status 	 describe the latest evidence-based practices for supporting stopping smoking for people from priority groups and those with additional needs
 describe prevalence and patterns of smoking and stopping smoking in priority groups, such as pregnant women and people with mental illness describe changes in smoking and stop smoking patterns over time and across different demographic groups describe nicotine delivery systems e.g. vaping and nicotine pouches and other tobacco delivery systems e.g. heated tobacco products 	 describe why effective stop smoking support must be embedded within the communities of priority groups and be linked to other health, social and third sector services that people with additional needs use recognise that higher rates of smoking are associated with a number of factors, such as trauma, mental illness, homelessness, poor educational attainment, unemployment, poverty, spending time in prison, the level of smoking in an individual's home/community, access to treatments, and the use of alcohol and illicit substances

Smoking and health		
Stop Smoking Practitioner core knowledge competences	Stop Smoking Practitioner advanced knowledge competences (in addition to core knowledge competences)	
list the major life-threatening diseases and health conditions to which smoking contributes	 describe how and why smoking disproportionally affects some communities, individuals and groups 	
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 and breastfeeding 		
 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 		

Stopping smoking	
Stop Smoking Practitioner core knowledge competences	Stop Smoking Practitioner advanced knowledge competences (in addition to core knowledge competences)
 accurately describe the process of stopping smoking in a way that reflects that attempts to stop can be arrived at suddenly or gradually, and 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 nicotine addiction and tobacco dependence and how these develop list nicotine withdrawal symptoms and their natural time course describe the common reasons people give for why they smoke and how far these reflect the true effects of smoking describe environmental, socio-demographic and psychological factors associated with tobacco dependence 	 describe population groups that may experience higher tobacco dependence describe levels of motivation to stop smoking and response to treatment for groups experiencing inequalities explain the barriers people in priority groups experience when attempting to stop smoking or when accessing stop smoking services

Stop smoking treatments		
Stop Smoking Practitioner core knowledge competences	Stop Smoking Practitioner advanced knowledge competences (in addition to core knowledge competences)	
 describe the principles, and long-term and short-term effectiveness, of behavioural support (individual and group-based) describe the effectiveness of treatment approaches, including abrupt quit and cut down to stop (CDTS) identify potential difficulties associated with providing group-based support, such as client recruitment and retention, organisational logistic demands, and how these can be addressed describe the full range of evidence-based stop smoking aids available to support stopping smoking, including their efficacy, correct use, contraindications and cautions, drug interactions, side effects, and relevant clinical guidelines explain why complementary therapies and unproven commercial treatment programmes for stopping smoking 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) 	 describe the principles and best practices for adapting behavioural support for people in priority groups and those with additional needs recognise that symptoms of mental illness, learning disabilities and/or the effects of medications may affect the ability of individuals to engage in traditional forms of support describe best practices for individualised dosing of stop smoking aids, especially for people with high levels of tobacco dependence, repeated unsuccessful past quit attempts, severe mental illness (SMI) and substance use 	

The wider context		
Stop Smoking Practitioner core knowledge competences	Stop Smoking Practitioner advanced knowledge competences (in addition to core knowledge competences)	
 demonstrate an understanding of health inequalities associated with tobacco use in the UK show awareness of the contribution of smoking cessation to public health and to reducing health inequalities demonstrate understanding of the role that smoking cessation plays in wider tobacco control strategies describe the cost effectiveness of stop smoking interventions compared with other life-saving clinical interventions 	describe the cost implications and cost effectiveness of stop smoking aids and stop smoking support delivered to clients from priority groups and those with additional needs	

Stop Smoking Practitioner Skills Competences

The table below describes the **skills competences** that underpin stop smoking interventions.

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

Tobacco dependence intervention

General communication and engagement	
Stop Smoking Practitioner core skills competences	Stop Smoking Practitioner advanced skills competences (in addition to core skills competences)
 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 	 build rapport with clients and staff in priority group service settings build rapport with clients with additional needs who may find it more difficult to engage with the service tailor communication with consideration of clients' physical, psychological and cognitive presentation communicate using tailored language to increase acceptability among members of priority groups apply the principles of strength-based and trauma-informed practice, as appropriate

- distinguish between appropriate and inappropriate written materials, and should they be required, 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

- demonstrate respect for, and understanding of, the interplay between smoking and challenging life circumstances
- demonstrate ability to appropriately tailor interactions for clients with mental health conditions, including short-term planning and more frequent follow-up when indicated

Assessment	
Stop Smoking Practitioner core skills competences	Stop Smoking Practitioner advanced skills competences (in addition to core skills competences)
Assess clients': commitment, readiness and ability to quit in one step (abrupt quit) or gradually (CDTS) throughout the quitting process past smoking behaviour, including history of quit attempts use of other nicotine delivery systems e.g. vaping and nicotine pouches and other tobacco delivery systems e.g. heated tobacco products self-reported and CO-validated smoking status and deal appropriately with any discrepancies between these. Explain the reasons for measuring CO both prior to and after the quit date levels of available social support, including assessment of client 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 assess the need to collaborate with other services involved in clients' care assess and address clients' low motivation and ambivalence about stopping smoking	 assess clients' needs and adapt the treatment programme to physical, psychological and cognitive presentation, including practical considerations (e.g. time, location and duration of appointments) conduct ongoing reviews of needs and develop tailored support plans, with the flexibility to adjust and layer behavioural support, behaviour change techniques and stop smoking aids

Planning behavioural support	
Stop Smoking Practitioner core skills competences	Stop Smoking Practitioner advanced skills competences (in addition to core skills competences)
 inform clients about the abrupt quit treatment programme and how it works assist clients to set a quit date use relevant information from clients stopping in one step (abrupt quit) to develop person-centred, tailored treatment plans show an appreciation of client choice, and emphasise clients' choice and preferences within the bounds of evidence-based practice identify medications clients are taking for physical or mental health conditions that interact with smoking, and understand the importance of ensuring that the prescribing team are aware of the quit attempt and the possible need for medication review explain to clients how smoking affects the way some medications work and help them (and their family/carers, if appropriate) to remain vigilant regarding monitoring side-effects, ensuring that clients know how to seek healthcare support recognise when clients should be referred for specialist tailored stop smoking support recognise when clients require support outside of the stop smoking service remit and sensitively signpost/refer to appropriate organisations (e.g. money, housing, mental health, bereavement) 	 develop person-centered, tailored treatment plans with clients who have additional needs assess the need for longer lead-in times to treatment and pre-treatment with stop smoking aids anticipate the need to provide more intensive support (frequency of contacts) and extended duration of treatment (12 weeks or longer) assess the suitability of a structured CDTS plan for clients assist clients to set a quit date (abrupt quit) or reduction date (CDTS) work with clients to develop a reduction plan advise clients on the use of stop smoking aids (nicotine replacement therapy [NRT], nicotine vapes, varenicline) as part of a CDTS plan be familiar with the effect stopping smoking has on some medications and the medications that require monitoring following stopping smoking, and demonstrate an ability to communicate with prescribers regarding the management of medications during clients' quit attempts

Behavioural support: addressing motivation	
Stop Smoking Practitioner core skills competences	Stop Smoking Practitioner advanced skills competences (in addition to core skills competences)
 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 clients the principles and effectiveness of the typical behavioural support and stop smoking aids that can support a quit attempt apply appropriate behavioural support strategies to enhance clients' motivation and self-efficacy maximise clients' commitment by asking them to affirm a strong commitment to start, continue, or restart the quit attempt assist clients in identifying their reasons for wanting to stop smoking and address any concerns that they have about negative aspects of stopping emphasise to clients the importance of, and secure commitment to, the 'not a puff' rule once the quit date has been reached 	 respond to fluctuating motivation strengthen the 'ex-smoker' identity of clients with additional needs support clients with additional needs to maintain engagement in treatment re-engage clients in treatment after setbacks and relapse explain the benefits of stopping smoking to other people in clients' homes, peer groups and local communities, and health, social and informal care workers

- 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 clients' 'ex-smoker' identity (e.g. encouraging clients to regard smoking as no longer part of their 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

Stop Smoking Practitioner advanced skills competences accurately describe to clients what they may experience in terms of nicotine withdrowal symptoms and suggest evidence-based approaches to alleviate these discuss barriers, triggers and relapse predictors and assist clients to develop appropriate strategies to cope with them assist clients to set achievable goals (e.g. one day at a time) that support the aim of remaining abstinent, and prompt frequent reviews of progress towards the goal of being permanently smokefree discuss the restructuring of clients' social lives, including specific advice on avoiding exposure to social cues for smoking discuss potential ways of changing clients' daily routines and physical environments to minimise exposure to smoking cues (e.g. removing ashtroys) suggest ways of minimising stress and other psychological demands to conserve mental resources for concerned clients, outline weight and alcohol/caffeine consumption control methods Stop Smoking Practitioner advanced skills competences (in addition to core skills competences) identify and address barriers to stopping and relapse triggers common to clients with additional needs support clients to develop a structured CDTS plan (e.g. which cigarettes to remove and how to cope with cutting them out) work with clients to set progressive smoking reduction goals elicit commitment to the reduction goal and coping plan address barriers and setbacks encountered and adjust the CDTS plan assess progress with the reduction plan and introduce additional strategies address stalled progress in the CDTS plan discuss ways of managing stress and building on resilience for clients from priority groups and those with additional needs to develop skills for coping with urges to smoke support clients with additional needs to develop skills for coping with other people who smoke in the places where they live, work or spend time demonstrate an understanding for increasing clients' confidence	Behavioural support: supporting clients to exercise self-control		
of nicotine withdrawal symptoms and suggest evidence-based approaches to alleviate these discuss barriers, triggers and relapse predictors and assist clients to develop appropriate strategies to cope with them assist clients to set 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 smokefree discuss the restructuring of clients' social lives, including specific advice on avoiding exposure to social cues for smoking discuss potential ways of changing clients' daily routines and physical environments to minimise exposure to smoking cues (e.g. removing ashtrays) suggest ways of minimising stress and other psychological demands to conserve mental resources for concerned clients, outline weight and alcohol/caffeine consumption control methods common to clients with additional needs support clients to set progressive smoking reduction goals elicit commitment to the reduction goal and coping plan address barriers and setbacks encountered and adjust the CDTS plan assess progress with the reduction plan and introduce additional strategies address stalled progress in the CDTS plan discuss ways of managing stress and building on resilience for clients from priority groups and those with additional needs support clients with additional needs to develop skills for coping with other people who smoke in the places where they live, work or spend time demonstrate an understanding for increasing clients' confidence	Stop Smoking Practitioner core skills competences		
In their ability to stop smoking support clients who have lapsed and/or relapsed to get back on track	of nicotine withdrawal symptoms and suggest evidence-based approaches to alleviate these discuss barriers, triggers and relapse predictors and assist clients to develop appropriate strategies to cope with them assist clients to set 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 smokefree discuss the restructuring of clients' social lives, including specific advice on avoiding exposure to social cues for smoking discuss potential ways of changing clients' daily routines and physical environments to minimise exposure to smoking cues (e.g. removing ashtrays) suggest ways of minimising stress and other psychological demands to conserve mental resources for concerned clients, outline weight and alcohol/caffeine	 common to clients with additional needs support clients to develop a structured CDTS plan (e.g. which cigarettes to remove and how to cope with cutting them out) work with clients to set progressive smoking reduction goals elicit commitment to the reduction goal and coping plan address barriers and setbacks encountered and adjust the CDTS plan assess progress with the reduction plan and introduce additional strategies address stalled progress in the CDTS plan discuss ways of managing stress and building on resilience for clients from priority groups and those with additional needs support clients with additional needs to develop skills for coping with urges to smoke support clients with additional needs to develop skills for coping with other people who smoke in the places where they live, work or spend time demonstrate an understanding for increasing clients' confidence in their ability to stop smoking 	

Behavioural support: promoting effective use of stop smoking aids and other supporting activities

Stop Smokina	Practitioner core skills	s competences

- describe the full range of approved stop smoking aids (nicotine analogues, NRT, nicotine vapes and bupropion) and how they work, and assist clients in choosing which aid 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 clients' experience of any stop smoking aids 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 clients receive their stop smoking aids easily
- reassure clients about the safety of stop smoking aids, compared to smoking
- facilitate and advise on clients' 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

Stop Smoking Practitioner **advanced** skills competences (in addition to core skills competences)

- facilitate individualised dosing of stop smoking aids, in particular for people with high levels of tobacco dependence, repeated unsuccessful past quit attempts, SMI and substance use
- expertly use high-dose stop smoking aids for people who are stopping abruptly and expertly increase doses/amounts of stop smoking aids for people who are gradually reducing
- assess the need for, and facilitate, extended use of stop smoking aids (beyond 12 weeks)
- assess the need for the layering of stop smoking aids with different mechanisms of action
- advise clients on pre-quit date treatment with NRT, nicotine vapes or nicotine analogues
- advise clients on the use of stop smoking aids (NRT, nicotine vapes and varenicline) as part of a CDTS plan
- advise on modifying the dose of NRT and nicotine vapes as the reduction plan progresses

Stop Smoking Practitioner core skills competences	Stop Smoking Practitioner advanced skills competences (in addition to core skills competences)
 keep accurate records for personal use of the number of clients seen and Russell Standard (clinical) success rates 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 Practitioner in a way that meets the appropriate ethical standards obtain and accurately interpret important new information that relates to clinical 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 practitioners, team managers, or other healthcare professionals for practice supervision/guidance facilitate intervention ending in a planned manner work within service boundaries and professional limitations 	 keep accurate records for personal use of the numbers of clients seen who are on a CDTS plan work in a way that reduces the risk of clients becoming dependent on the service or practitioner promote Very Brief Advice on Smoking (VBA+) in health, social and voluntary services, emphasising the importance of tailoring the intervention to client group and setting respond professionally to resistance, both in general and from other health or social care professionals

Group-based competences	
Stop Smoking Practitioner core skills competences	Stop Smoking Practitioner advanced skills competences (in addition to core skills competences)
 recognise when clients may benefit from group-based stop smoking support and facilitate referral 	Planning group-based behavioural support for people in priority groups or those with additional needs
	 deliver group-based behavioural support for people in priority groups and those with additional needs
	Planning behavioural support in (closed) group contexts
	assess clients' suitability for group support
	plan, organise, establish and run a stop smoking group
	 manage problems of comorbidity (psychological and physical) within the group appropriately
	Maximising motivation to quit within the (closed) group context
	stimulate and facilitate supportive group discussions
	 apply techniques, such as group tasks or placing of chairs, to reinforce group interaction and enhance mutual group support and/or bonding
	encourage clients to make public promises/contracts with other group members
	foster a sense of commitment to the group
	 encourage group members to compare their CO readings
	 facilitate communication of group member identities (e.g. using name badges, encouraging clients to talk about themselves)
	report on missing members appropriately to maintain group motivation

Supporting activities in the (closed) group context

- Supporting activities in the (closed) group context
- facilitate choice of stop smoking aid in a group context
- encourage sharing of experiences, including the use of stop smoking aids, dealing with triggers, problem solving and engagement with alternative healthy pursuits

Communication in the (closed) group context

- describe the content of group support sessions and ways in which group processes can sustain or enhance motivation to stop smoking, and to help create accurate positive treatment expectations
- address any barriers to group participation and progress
- deal with 'lapses' within the group to minimise the likelihood that they will lead to full 'relapse'
- plan appropriately for the group ending and prepare clients for this
- close the group and signpost to addition support as required