

SCHEDULE 1

Service Specification
Intermediate Stop Smoking+ Service - Pharmacy

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1. **Scope**

The purpose of this Approved Provider Framework is to enable easy and equitable access to stop smoking interventions. The aim is that through ease of access to appropriate stop smoking treatments this service will contribute toward a reduction in smoking prevalence across Newcastle upon Tyne by supporting high quality stop smoking service provision. In addition it aims to:

- To ensure patients who are smokers have an accessible treatment service to help them to stop.
- To contribute to local public health and tobacco control strategies, which have a commitment to reduce smoking, particularly in vulnerable groups.
- To contribute to the Newcastle City Council's target measured by the number of smokers who stop at four weeks.

The voucher scheme is designed to significantly improve service delivery and benefit patient care, as clients will be able to have swift and timely access to nicotine replacement therapy (NRT) recommended by Specialist Advisor or Intermediate Advisor that is supporting them. The voucher scheme removes the delay and frustration out of getting NRT to aid a quit attempt as it removes the need to visit the GP to get a prescription/'letter of recommendation'.

The use of NRT in an individual who is already accustomed to nicotine introduces few risks and it is widely accepted that there are no circumstances in which it is safer to smoke tobacco than to use NRT [British National Formulary 2015].

Voucher schemes have been used across the country successfully through Stop Smoking Services and are proven to be successful in meeting patient/client needs. However such a system has to be run within Department of Health regulations and local processes should be implemented to ensure patient/client safety and fraud protection.

- 1.1 This service refers to the provision of a one-to-one intermediate stop smoking service which complies with best practice and evidence based stop smoking treatment, that is, provision of a pharmacological product to reduce withdrawal cravings within a programme of behavioural support. This approach can quadruple a smoker's chances of stopping, compared with an unaided quit attempts.
- 1.2 The Intermediate Stop Smoking Service is the provision of support and treatment as described here, and in training. It is in addition

to brief advice given routinely or as part of other programmes such as NHS Health Check Programme.

2 **Targets**

- 2.1 Reducing smoking in Newcastle remains a significant target and priority for the city and the local authority has set out two main targets within its vision
- To end the damage that tobacco inflicts on families and end the burden caused by smoking
 - To be a 'smoke free' city – Newcastle to achieve the aim of 5% or fewer people smoking by 2025
- 2.2 Local prevalence remains above the national average;
- Newcastle over 18 has increased from 22.9% to 23.7% compared to an average of 18.4% for England
 - Prevalence for routine and manual workers is 32.7% compared to an average of 28.6% for England
- 2.3 This citywide target currently set by Public Health is 2,500 4-week quitters per annum. This is an extremely challenging target. At current rates, less than half of smokers who set a quit date manage to remain quit at 4 weeks, and in order to meet targets, we need to provide high quality, accessible services using best possible practice.
- 2.4 Best results (that is, more 4 week quitters) are achieved when there is a dedicated stop smoking clinic and users receive behavioural advice and support throughout the period of their quit attempt.
- 2.5 In developing this service, it is necessary to view it in the context as a major factor in its contribution to achieve the citywide target. This service specification is for work done by pharmacies which locally exceeds that which would normally be regarded as standard work within pharmacies. It also builds on this to support pharmacies in delivering even higher standards of care.
- 2.6 CGL will work with pharmacies signed up to deliver the stop smoking service to agree individual targets based on likely footfall. Pharmacies will be expected to achieve a minimum of 50% quit rate and 85% CO validation rate.

3. **Service Provision**

- 3.1 This service forms part of the Programme of Stop Smoking Services for which Change, Grow, Live (CGL) have been commissioned as Programme Managers by Newcastle City Council.
- 3.2 Pharmacies who sign up to deliver the service will provide Brief Intervention plus Pharmacotherapy.
- 3.3 Service provision must be provided by staff employed directly by the pharmacy.
- 3.4 The service should comply with quality standards, in line with the training provided and the service level agreement.
- 3.5 The area of the pharmacy used for provision of this service must provide a sufficient level of privacy and safety. The pharmacy should ultimately be working toward having a private consultation area which meets the regulatory requirements for advanced services (as set out in the drug tariff) as a minimum.
- 3.6 Clients wanting appointments with a pharmacy advisor should be seen within 2 weeks or referred to other local services (participating pharmacy or drop-in) or given the number of the specialist Stop Smoking Service
- 3.7 Clients should be given weekly appointments for at least the first 4 weeks
- 3.8 The first appointment should be for a minimum of 20 minutes, and subsequent appointments for 10 minutes
- 3.9 Missed appointments should be followed up (3 attempts) by telephone
- 3.10 Pharmacy advisors should use the carbon monoxide (CO) monitor to validate quit attempts. Pharmacies are expected to achieve an 85% CO validation rate of clients self-reporting at 4-weeks
- 3.11 CGL will loan each pharmacy a CO (carbon monoxide) monitor. Pharmacies are responsible for the costs of consumables in connection with the use of the carbon monoxide monitor.

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- 3.12 Pharmacies will sign a loan agreement for the CO monitor and will return to CGL if they stop providing the stop smoking service. Failure to return the CO monitor may result in a charge for replacement.
- 3.13 Pharmacy advisors must complete monitoring returns for each client setting a quit date, and who is followed up after 4 weeks on agreed data system. Pharmacies are expected to achieve a minimum of 50% quit rate at 4 weeks.
- 3.14 Very dependent smokers or smokers with special needs of any kind can be referred to the specialist Stop Smoking Service for more intensive support. Routine users should be seen by the pharmacy and not referred to the specialist Stop Smoking Service (unless there are long waiting times as previously outlined).
- 3.15 Pharmacies who have trained advisors who are able to provide language support to certain communities will notify CGL to establish an appropriate referral pathway.

4 Eligibility and Criteria

- 4.1 The service is suitable for anyone aged 12+ who lives, works or studies in Newcastle or who has a GP in Newcastle.
- 4.2 Clients can make 2 quit attempts a year with the support from the service. If a client drops out of treatment they can not access the service for 6 months from their registration date.
- 4.3 Exceptions to this rule include pregnant women who can access the service throughout their pregnancy and up to 12 weeks post partum.
- 4.4 Pharmacy advisors can submit an exception request to CGL for authorisation when someone has dropped out of treatment (provided a legitimate reason is given, for example, client was admitted into hospital for ill health) but is motivated to quit smoking.

5 Training and Programme Management

- 5.1 All pharmacy stop smoking advisors who provide stop smoking interventions and return monitoring data must be registered as active stop smoking advisors with CGL and must adhere to the quality principles agreed in training. All pharmacy stop smoking advisors must attend the relevant training set by CGL. Training will consist of a half day training session.
- 5.2 All trained stop smoking advisors will also attend annual update training to ensure competency and skills are maintained.
- 5.3 All training provided by CGL is free of charge. CGL will provide quarterly training opportunities for staff to be trained. Pharmacies will ensure that staff will be given time to attend relevant training.
- 5.4 Pharmacies signed up to deliver provision will ensure that if trained staff are on annual leave or sickness, or leave employment, that subsequent staff will be trained to ensure continuity of service provision.
- 5.5 If a pharmacy advisor leaves to work in another Newcastle Pharmacy, CGL will be informed to ensure their records are accurate and up to date.
- 5.6 If a pharmacy is unable to deliver the service at any time, they must notify CGL at the earliest convenience.
- 5.7 Each pharmacy will be allocated a CGL mentor who will offer support and guidance whenever needed. Each pharmacy will commit to a minimum of one 10 minute face to face mentoring session each month.
- 5.8 CGL will ensure that pharmacists and staff involved in this service provision are aware of and act in accordance with local protocols, NICE guidance and local drugs formulary.

6 Supply of NRT and Varenicline through Voucher Scheme

This Service Level Agreement is to be read in conjunction with: The Patient Group Direction relating to the supply of Varenicline in Newcastle upon Tyne.

- 6.1 The provision of NRT in pharmacies should be for up to a maximum of 12 weeks with an exception for pregnant women who can have NRT throughout their pregnancy and up to 12 weeks post partum. Pharmacy advisors should continue to support clients using NRT until the course of treatment is complete.

6.2 Pharmacy advisors should continue to support clients using Varenicline until the course of treatment is complete i.e. 12 weeks

6.3 The cost of NRT or Varenicline for clients:

- If a client pays for prescriptions:
- The client will pay for supply of each recommended product for every voucher issued (i.e. if combination therapy is requested then the client will need to pay for TWO prescription fees)
- The Declaration of Exemption section should be crossed through.
- If the client does not pay for prescription:
- No charge will be incurred by the client
- All clients who are exempt MUST sign the Declaration of Exemption on the voucher and indicate which category makes them exempt.
- Clients who are exempt should be told they should show proof of exemption to the Pharmacist when they collect the NRT.

6.4 The Vouchers

- At all times the vouchers remain the property of Newcastle City Council
- Vouchers can only be used in connection with clients accessing Stop Smoking Services.
- It is the responsibility of CGL, as project managers of Stop Smoking Services in the city, to monitor the operation of the scheme.
- Payments will be made by Newcastle City Council directly to Pharmacies on a quarterly basis for the dispensing of vouchers.
- Payments will be made by CGL directly to Pharmacies on a quarterly basis for successful quits.
- Pharmacies are responsible for the vouchers they sign for. CGL will carry out audit checks to ensure all vouchers are accounted for.
- It is the responsibility of the pharmacy to ensure that vouchers are stored securely and only used by staff trained to deliver stop smoking interventions.
- Lost, stolen, or damaged vouchers must be reported to CGL.

6.5 The Management of the Scheme

- Newcastle City Council have commissioned CGL to administer the voucher scheme as part of the overall project management of Stop Smoking Services in the city
- CGL will be responsible for distributing the vouchers amongst the Stop Smoking Services and retaining a record of the quantity and voucher number sequences given to each Service provider.
- CGL will distribute NRT and Varenicline vouchers to each pharmacy. Each pharmacy should contact CGL when they are running low so their stock can be replenished. Pharmacies are responsible for signing for vouchers and confirming the voucher numbers they have.

6.6 Information Recording

- It is the responsibility of the pharmacy advisor to ensure that the details of their client interventions are recorded onto the approved case management system.
- It is the responsibility of the Pharmacist dispensing product for which a voucher will be used to claim payment to ensure that details of the voucher are entered onto the approved database including:
 - i. Any assessment fees claimed (Varenicline only)

- ii. The outcome of the assessment
- iii. Any products dispensed
- iv. Any voided vouchers
- It is the responsibility of the Pharmacist conducting an assessment for Varenicline to inform the GP of the outcome of that assessment.

7 Support for clients using E-Cigarettes

- 7.1 Support can be provided to clients who wish to use an e-cigarette to quit smoking. In order to be eligible for the service, smoking regular cigarettes at the time of starting their quit attempt (either instead or alongside e-cigarettes). Smoking status can be verified using a CO monitor.
- 7.2 E-cigarettes are NOT paid for through the Council’s Voucher scheme. Clients wishing to use this method of nicotine delivery will need to purchase the e-cigarettes themselves, but can access the other aspects of the Council’s service.

Recommendations can be made for clients to purchase an e-cigarette from a vape store who are members of the IBVTA (Independent British Vaping Trading Association).

- 7.3 NRT can be used as well as an e-cigarette. E-liquids are available with 18mg, 16mg, 11mg, 10mg, 6mg, 3mg and 0mg nicotine amps.

7.4 Illustration:

Type of E-Cigarette Use	Eligible for Service?
Long term use of e-cigarette, no longer smoke cigarettes and have no plans to stop vaping	NO
Commenced use of e-cigarette alongside smoking but aim is to reduce smoking levels rather than quit	NO
Cigarette smoker who wants to quit and contemplating using an e-cig to help them quit	YES -support (and possibly supplementary NRT) only; e-cigarettes to be purchased by client
Current user of e-cigarette but still smoking regular cigarettes and wants to quit smoking	YES -support (and possibly supplementary NRT) only; e-cigarettes to be purchased by client

8 Payments

Each pharmacy contracted to provide the stop smoking service will be paid:

- 8.1 **£10** per patient accessing the service who sets a quit date and **£35** per patient who engages in a treatment programme according to the service operation, with outcome data of ‘Yes – quit smoking’ recorded as the 4 week quit status. This will be paid by CGL on a quarterly basis.
- 8.2 Payment to pharmacies will be provided according to timely and complete data submitted on the approved database as per schedule below (see point 9.6).
- 8.3 Where Stop Smoking Advice originates within the dispensing Pharmacy, Newcastle City Council will reimburse the pharmacy for the cost of the NRT or Varenicline dispensed under the voucher and any additional costs relating to the PGD.
- 8.4 Where Stop Smoking advice originates outside the dispensing Pharmacy, Newcastle City Council will reimburse the pharmacy for the cost of the NRT or Varenicline dispensed under the voucher and any additional costs relating to the PGD.

9 Monitoring and Recording

- 9.1 Pharmacies signing up to deliver stop smoking interventions agree to use the approved database for recording of behavioural support and quit status.
- 9.2 Newcastle City Council and CGL will provide access to the approved database and any necessary training.

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- 9.3 Pharmacies will continue to record supply of NRT and Varenicline on PharmOutcomes
- 9.4 The service provided in pharmacies is monitored by the return of stop smoking data to CGL who will report to Newcastle City Council. All pharmacies providing this service will need to complete and return the required data on a quarterly basis, using the service modules on Pharm Outcomes and Quit Manager.
- 9.5 Data must be forwarded to CGL within the monitoring returns time frame in order that results can be collated and included in annual targets. All activity must be recorded on the agreed designated database as soon as possible, and in any event within 7 days after delivery of the intervention.

9.6 Schedule for monitoring returns

2019/20	Quit date between	End of Follow up period	Deadline for completion on approved database
Quarter 1	01/04/2020 - 30/06/2020	12/08/2020	26/08/2020
Quarter 2	01/07/2020 - 30/09/2020	11/11/2020	25/11/2020
Quarter 3	01/10/2020 - 31/12/2020	11/02/2021	25/02/2021
Quarter 4	01/01/2021 - 31/03/2021	14/05/2021	28/05/2021

Future dates will be sent to providers once they have been released.

- 9.7 Organisations must ensure that all appropriate data fields are completed to ensure accurate recording and to meet KPI requirements.
- 9.8 Pharmacies must also participate in additional audits as identified to them by CGL within reasonable timescales. Compliance with data recording must be kept up to date and in line with CGL policies.
- 9.9 Pharmacies must ensure that all stop smoking client activity is recorded on agreed data system within 7 days of occurrence to ensure accuracy of information recorded.
- 9.10 The stop smoking service aims to be paperless. Information should therefore be recorded in real-time.
- 9.11 Failure to record data within the deadline for completion date will result in non-payment.

10 **Quality indicators**

- 10.1 The pharmacy has appropriate health promotion and service material available for users and promotes its uptake.
- 10.2 The pharmacy reviews its standard operating procedures and the referral pathways for the service on an annual basis.
- 10.3 The pharmacy can demonstrate that pharmacists and staff involved in the provision of the service have undertaken CPD relevant to this service.
- 10.4 The pharmacy can demonstrate that service and monitoring guidelines as stated here and in training, are followed throughout the provision of this service.
- 10.5 This citywide target currently set by Public Health is 2,500 4-week quitters per annum. CGL will work with pharmacies signed up to deliver the stop smoking service to agree individual targets based on likely footfall.
- 10.6 Pharmacies will be expected to achieve a minimum of 50% quit rate and 85% CO validation rate.

11 **Exclusions**

There are no exclusions for this service specification.

12 **Termination of the agreement**

Either party can terminate this agreement by giving three months' notice in writing, unless both parties agree a shorter period of notice.

13 Contract Management for this SLA:

13.1 Payment to pharmacies will be provided according to timely and complete data

13.2 Pharmacies must make data available to CGL for audit purposes, within reasonable timescales to:

CGL Project Manager

Rachel Nichol, Dobson House, Regent Farm Road, Gosforth, NE3 3PF. Tel. 0191 269 1103 or email: Rachel.nichol@cgl.org.uk

CGL Services Manager

Jazz Chamley, email: jazz.chamley@cgl.org.uk Tel: 07795 800472

14 Governance

Quality, dispute resolution and all other governance issues is set out in the overarching CGL contract.

APPENDIX A

PROVISION OF STOP SMOKING INTERVENTIONS – NEWCASTLE

Project code: P858

Details of Practice

Pharmacy Name and Full address	
Contact Name and Telephone, Email:	
Company Registration:	

Name of Bank/ Building Society / Account Name;	
Sort Code:	
Account Number:	

Stop Smoking Interventions – Newcastle	
Payment for people who set a quit date:	£10 per person
Payment for successful quits:	£35 per successful quit

Declaration

I declare that all services claimed for will be carried out by a member of staff who have received the appropriate training from CGL, Newcastle Stop Smoking + Service and have been provided according to the Service Level Agreement. Payment will be made 30 days from invoice date.

Signed: _____

Name: _____
(Please print)

Date: _____