

Restrictive practice and Smoke Free policies

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Acknowledgements: Dr Debbie Robson, KCL

 KING'S HEALTH PARTNERS



Overview

- Where we started – central SF team
- What we learned
- How its going – integrated SF team



Traditionally tobacco dependence wasn't just restricted in the NHS it was largely undermined



Changing hearts and minds



Have conversations about the SF policy – EPE Model

Explain why the SF policy is important

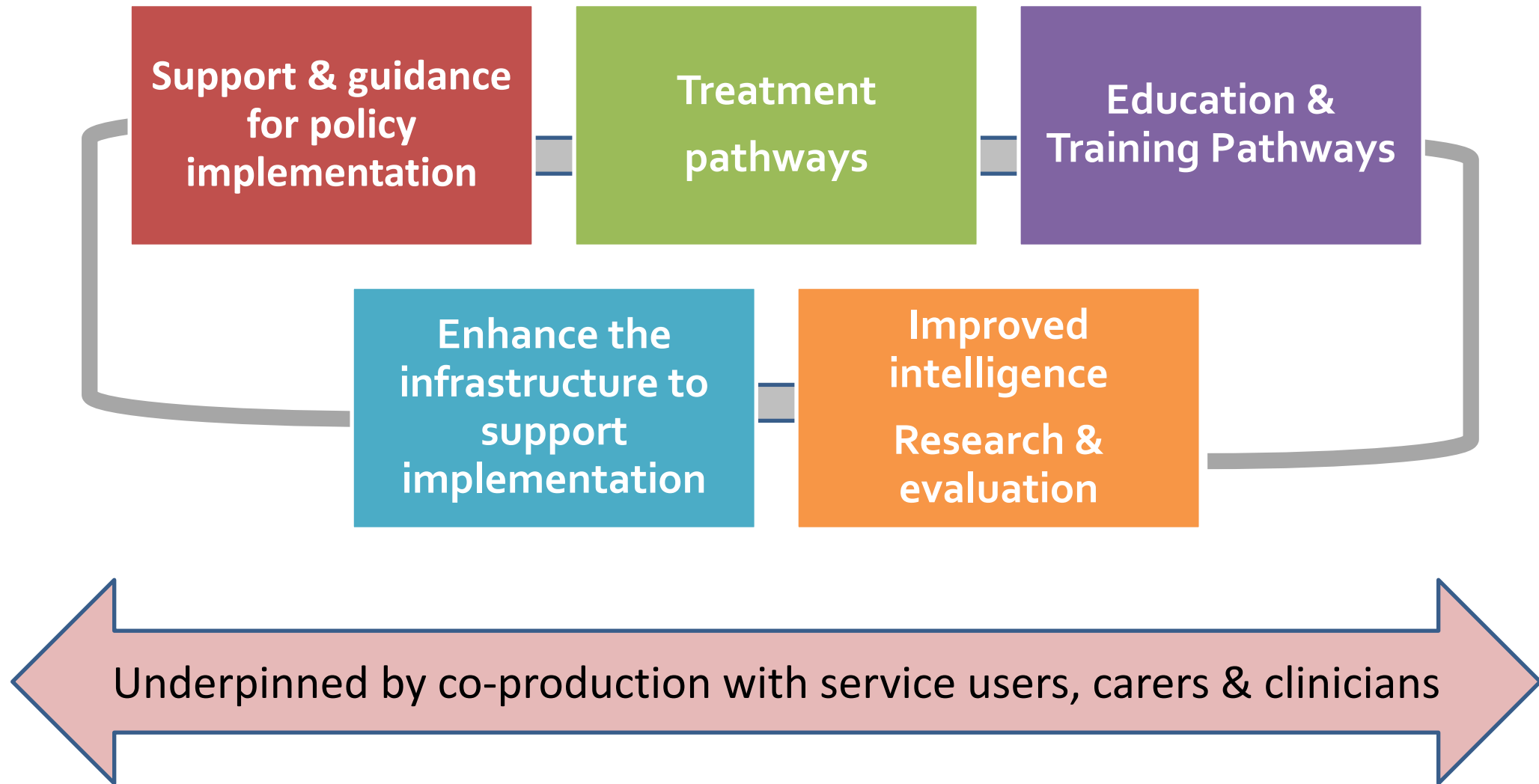
Show people what to do

Change the system to accommodate the new routine

Catch people doing the right thing

Celebrate!

Changing the culture



SLaM's Tobacco Dependence Treatment Pathway



ASK



ADVISE



ACT



Medication+/
or
e-cigarettes + intensive
behavioural support

Quit completely
in one go

Cut down
then quit

Cut down

Temporarily
abstain

All clinical staff offer very brief advice (VBA)

Offering support to quit *rather* than asking a smoker how interested are they in stopping or telling a person they should stop, leads to more people making a quit attempt

(Aveyard et al, 2012. Addiction 1076, pp 1066-73)

Connect smokers with specialist trained advisers



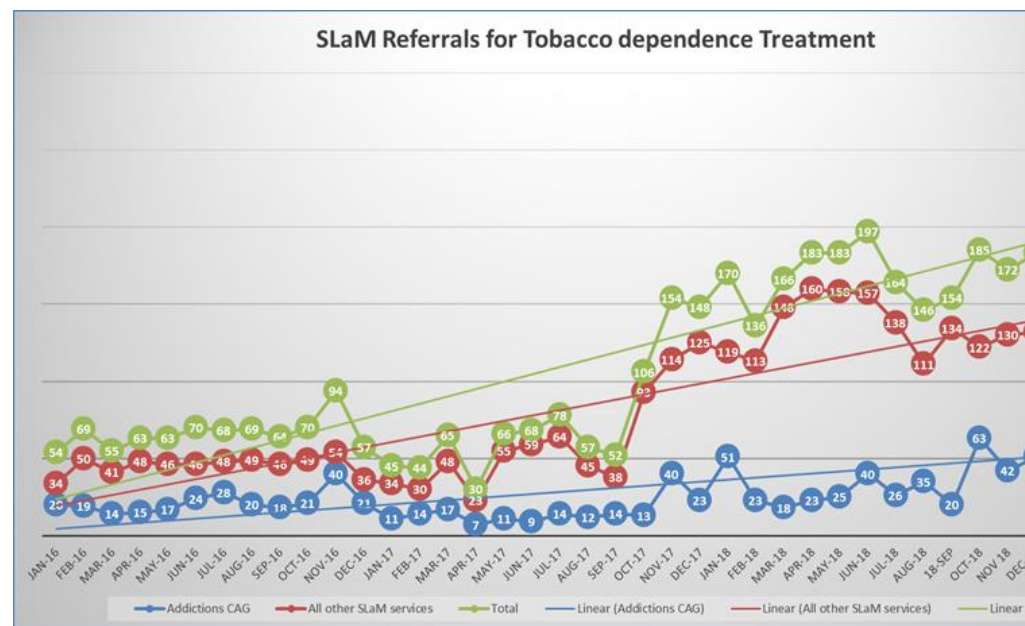
Local Stop Smoking Service

**The National Referral System (NRS)
automatically sorts and sends referrals**

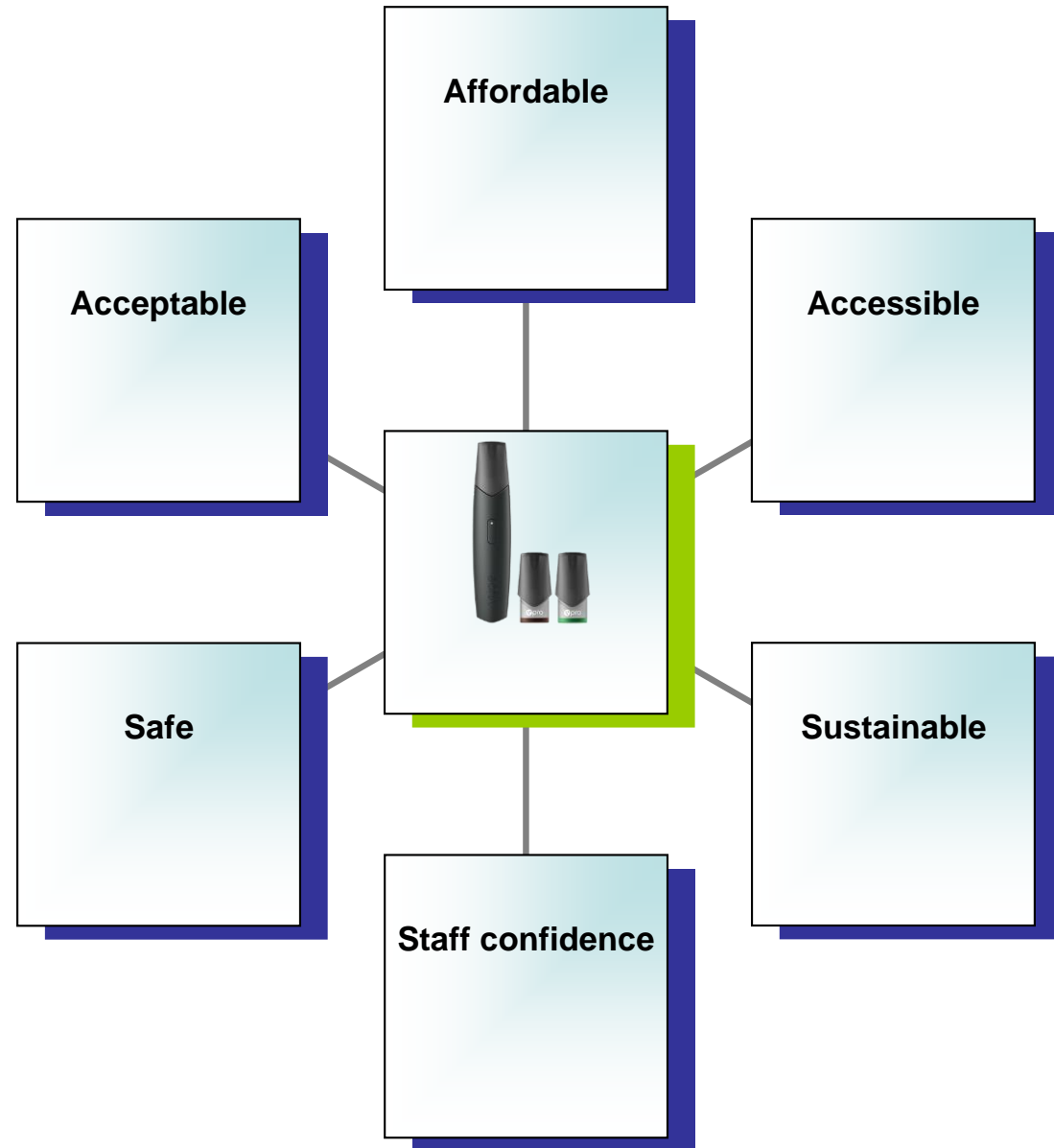


Remove restrictions

- Share data to improve engagement
- Homely Remedy policy - easy access to NRT
- Routinely check smokers CO levels
- Sell e-cigarettes in retail outlets
- Install smart-charging units to promote independent e-cigarette use



Remove restrictions on e-Cigarettes



Listening to patients

- Stop undermining recovery by storing tobacco
- Plan smoke free leave to avoid high risk situations
- Provide more support for dealing with cravings
- Plan activities to help manage boredom/stress
- Ensure enough nicotine replacement/e-cigarette
- Provide more support at the point of discharge



Policy changes



2016-2019

Stop undermining recovery by storing smoking materials

Support smoke free leave / discharge plans

Integrate routine CO monitoring

Ensure varenicline is offered as a treatment option

2019 -

New integrated care model – 12 weeks support post-discharge

Free e-cigarette options and refills

Increased team to 14 TD Advisors

Bespoke training for CAMHS focus on prevention & smoke free homes

Summary

- The largest possible health gains can be achieved if smokers using MH services and staff working in MH services are given support to quit as soon as possible and for good – this includes access to the best treatments as well as care provided in an environment that is conducive to quitting.
- We have found an integrated approach to care across services works well and is valued by service users

