



PATH Support Fund Newsletter - April 2008

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Partnership Action on Tobacco and Health (PATH) is an initiative managed by ASH Scotland that aims to reduce the number of people who smoke in Scotland. Now in its second phase of work (2005-08), PATH is continuing to support the implementation of Scottish and UK government policies on tobacco and smoking. Funded by the Scottish Government, PATH has taken a lead in a number of key developments to roll out and enhance evidence of good practice for Smoking Cessation Services across areas of training, data collection, evaluation, prevention and cessation.

The PATH Support Fund Projects

PATH was responsible for the dissemination of a three-year national Support Fund of around £900,000, for projects whose start/end dates fell between 2003-07. The funds were used primarily to enable local pilot initiatives (eleven in all) to deliver work on tobacco, which aimed to reduce the proportion of pregnant women and people faced with inequalities who smoke. To help PATH achieve its wider objectives, the projects undertook work supporting smoking cessation, prevention, or education (or a combination of these approaches) to gather evidence which could be rolled out nationally to help reduce smoking in those groups. Priority groups targeted by the Support Fund were pregnant women, older adults, ethnic minority groups, those on a low income and/or living in an area of high deprivation, and people with significant mental health challenges. One of the projects also supported inmates and staff at a prison.

Although continuation of these services was not necessarily an objective of the funding, PATH is delighted to see that several of them have been retained by their local NHS Smoking Cessation services. Here we provide an update on those projects, and also give details of other work that PATH is currently involved with across the fields of Training, Youth Development, and Research and Evaluation.



QuitFit – Cowdenbeath (NHS Fife)



This service, based in Cowdenbeath leisure centre and aimed at attracting clients from an area of high deprivation, has continued under the NHS since PATH funding ended in July 2007. It has proved to be a popular model with its clients, providing tailored exercise and initial free access to local leisure facilities as well as ongoing smoking cessation support. Margaret Bell, the service lead, has recently reported an increase in uptake by young people, and is considering starting

a group specifically for this client base.

Although originally based in Cowdenbeath in the Dunfermline & West Fife CHP area, satellite pilot projects have seen it rolled out into other localities across the region. Weekly groups have now started at Duloch Leisure Centre in Dunfermline (aimed at attracting clients from the nearby regeneration area of Abbeyview), the Beacon Leisure Centre in Burntisland, and at the Fife Institute of Physical and Recreational Exercise in

Glenrothes. It is hoped that the pilots will pave the way for ongoing services in those areas.



Stop For Life – Livingston (NHS Lothian)

Stop For Life was initially run as a pilot project from 2003-06, but has now evolved into an embedded specialist service based at St. John's Hospital in Livingston, providing support to pregnant women, their partners and families who wish to give up smoking. The service is led by a Clinical Nurse Specialist and two midwives who have trained as Stop Smoking advisors; they provide one-to-one support (usually in the client's home) and offer ongoing assistance through pregnancy and subsequent childbirth.

strategy for NHS Lothian is currently being updated, and it is hoped that Stop For Life will be rolled out across the whole of Lothian as a result (providing face-to-face contact initially, followed by telephone support). In March this year the service gave a presentation to clinical staff in assisted conception from the East of Scotland, who are updating the information they give to clients to ensure that smoking-related issues are covered.

has been adopted by NHS Fife (re-branded 'Quit 4 Life') as part of its own service provision; it is based at Forth Park Maternity Hospital in Kirkcaldy. The model is also being considered for use by NHS Grampian in the Aberdeen area. Stop For Life was voted best smoking cessation service in the UK at the 2005 QUIT Awards in London.



The maternity and neonatal The Stop For Life model

Glasgow Dental School (Glasgow University)

The aim of this project, which ran from 2004-07, was to determine the feasibility of recruiting patients into a Smoking Cessation trial within a dental setting; all patients were smokers, mainly from areas of high deprivation, and had been referred to the School's clinic with a potentially malignant oral lesion. They received support which was delivered either via the "Five A's" (ask, advise, assess, assist, arrange follow-up) or Behaviour Change Counselling model.

After PATH funding ended in March 2007 it was adopted by NHS Greater Glasgow & Clyde's "Smoking Concerns" service, providing three sessions per week to patients via the Maudsley method; as of April 2008 this will be increased to five sessions per week.

A presentation about the project's findings was given to oral consultants at the end of February, and papers derived from the funded pilot will be submitted to peer-reviewed journals in the oral health, public health and tobacco fields. An abstract has been submitted for inclusion at this year's UK National Smoking Cessation Conference (being held in Birmingham at the end of June), and the project's lead, Dr Viv Binnie, will be delivering a presentation on the project at a pan-European dental conference in London in September.

Dr. Binnie has also ensured that a day's Brief Advice training is included in dentistry undergraduates' studies, delivered to students at Glasgow University when in their third year and working with patients.

HMP Bowhouse, Kilmarnock (NHS Ayrshire & Arran)

This initiative aimed to address the high levels of smoking within the staff and prison populations of HMP Bowhouse in Kilmarnock, by developing appropriate interventions to help smokers quit. A Smoking Cessation Advisor provided smoking cessation support to prison inmates and staff, and also trained other staff to provide smoking cessation support. Nicotine Replacement Therapy (NRT) was provided via the Bowhouse health centre for inmates, and via a voucher scheme at local pharmacies to staff.

Upon completion of the pilot project in April 2006 the service was adopted by NHS Ayrshire & Arran's 'Fresh Air-shire' initiative as part of its generic Smoking Cessation package, and the lead worker remains in a full-time post offering both one-to-one and group support to inmates (one-to-one for staff).

When inmates complete their sentence and are released back into the community in Ayrshire, they are offered the chance to link up with locally-available Fresh Air-shire services (other inmates may be released elsewhere, in which case efforts will be made to put them in contact with local services if requested). Inmates who are transferred to another establishment are able to request access to similar cessation services, where provided.



The State Hospital, Carstairs

The State Hospital at Carstairs aimed to address smoking cessation in a structured manner, by monitoring and recording patients' smoking status, developing and delivering a smoking cessation programme and providing uniform advice to patients who smoke, and by providing smoking cessation education (in the form of Brief Advice and Specialist practitioner training) for key staff members. There is no doubt that this combination of approaches has had a positive impact on smoking rates amongst patients at Carstairs, which has decreased significantly - from 84% in April 2004 (prior to the service starting in October '04) to 66% by January 2008.

The State Hospital has also developed and implemented its own Tobacco Control policy, reviewed annually, which takes account of Carstairs being both a hospital and a 'primary residence' for its patients. This means that smoking is only permitted in specific designated (and ventilated) areas; it is not allowed at all on job placements or during recreational activities, which in the past had been highlighted by patients as one of the reasons for relapse. As a commitment to assist patients, the smoking cessation service provides education, counselling and support in conjunction with NRT free of charge.

Since funding ended from PATH in October 2007 the State Hospital's Board has continued to support the service, offering one-to-one and Group sessions to patients on a weekly basis; clients to the service either self-refer or are referred via the clinical team (nursing staff, GPs and/or psychiatrists). To date, a total of 146 people have been through the service, resulting in 5,105 collective smoke-free days.



Other Projects

The three remaining service-delivery projects have not been continued in the form that they took with the PATH Support Fund, but in two instances helped shape local service provision

CLASP: Cross- Lanarkshire Action on Smoking in Pregnancy (NHS Lanarkshire)

This project aimed to provide a 'Buddy' system for pregnant women, but that aspect of the service was not successful, with few clients wishing to be matched up to a volunteer supporter. Since the project ended in 2006, however, a pathway and protocol has been developed for referring all pregnant women to Smoking Cessation services available in the NHS Lanarkshire area, co-ordinated from Wishaw General Hospital.

This protocol ensures that the topic of smoking is raised with all pregnant women, and provides an "awareness pack" for all midwives. A pregnancy steering group for NHS Lanarkshire ensures that there is a joined-up approach to working, both in hospitals and in community health centres; seven local Smoking Cessation co-ordinators work with midwives to help facilitate this.

Dundee Smoking and Pregnancy Project (NHS Tayside)

This project was set up to review and develop the existing NHS Tayside pathway for pregnant smokers, and to pilot a service aimed at helping them stop smoking. The protocol for referral was revised as a result, but the pilot service (in reality, only provided by one Health Visitor) did not continue after completion in 2005.



The findings from the pilot did, however, help inform the local Tobacco Action Plan and there is now an incentive scheme, aimed at young pregnant women from deprived areas, running in Tayside (currently Dundee and Perth, with an imminent start in Angus – initially Arbroath, then being rolled out to other localities). Early data from Dundee shows much promise for this innovative way of engaging with a traditionally ‘hard to reach’ group; 42 women signed up for the service in 2007, and in 2008, initial results from weekly CO monitoring are indicating that 97% of clients are managing to stay quit.

Give Up Tobacco Substitute Exercise (GUTSE) Glenrothes (Fife Council)

This project, based at the Fife Institute of Physical Recreation and Exercise from 2003-2006, aimed to establish ongoing smoking cessation courses that would be offered to service users who had a physical, sensory or learning disability or mental health needs.

A lower-than-anticipated uptake of the service meant that the project did not take off in any significant way in Glenrothes, and was wound up early. However, the fitness instructor who was involved in delivering the smoking cessation advice continues to provide brief advice in an opportunistic way with leisure centre users, and the successful QuitFit service which started in Cowdenbeath is now offering a weekly class there. It is hoped that similarly encouraging results can be achieved with the local community in Glenrothes.



There were also three research-only projects in the Support Fund:

Edinburgh University – assessing tobacco use in multi-ethnic communities: the development of a culturally valid measure

This project, which was funded for one year (2003-04), achieved its aim of developing questionnaires relating to tobacco use that could be used by healthcare workers with clients whose first language is not English (speakers of Urdu, Punjabi, Sylheti and Cantonese). Based on their work, the research team made recommendations for future work developing this field of inquiry, and also produced an article for the Journal of Epidemiology and Community Health (available online at <http://jech.bmj.com/cgi/content/full/60/12/1034>).

The questionnaire is now being used by various healthcare professionals across the UK, including the ongoing “Born in Bradford” study, and the pilot trial of smoking cessation therapies in Birmingham.

Glasgow Caledonian University – Developing evidence-based Smoking Cessation training/education initiatives in partnership with older people and health professionals

The aims of this ten-month project (2003-04) were to gather qualitative data, which would in turn inform the development of training and education initiatives to help members of primary care teams provide older adults (65+) with information and advice that would encourage them to stop smoking. The resulting data helped provide recommendations for rolling out appropriate training to healthcare professionals.

The project lead, Susan Kerr, subsequently obtained funding from the ASH Scotland Tobacco & Inequalities fund (Wave 1 and Wave 2), which enabled her team to develop and test the tailored training. Evaluation of the training determined that it had been successful in enhancing the knowledge, attitude and practice of those involved, as well as being cost-effective for service providers. Discussions are currently ongoing with health boards to pilot the tailored training in local areas.

‘Smokey Joe’

Working for two years (2003-05), researchers from Edinburgh University, Queen Margaret University and NHS Argyll & Clyde (as it was then) sought to evaluate the process and impact of this smoking cessation service, which used a ‘narrative therapy’ approach to its work with clients from an area of high deprivation in East Renfrewshire. The ‘Smokey Joe’ service itself was established prior to this research being undertaken, and continued to be delivered locally in Barrhead, Paisley and Dumbarton after the evaluation was completed. The researchers’ findings were presented at the 2005 UK National Smoking Cessation Conference.

Other PATH news

Training and Development (T&D)

The accredited Brief Advice module (developed by PATH in partnership with Glasgow Caledonian University) has been significantly restructured, following feedback from students and an internal review by the T&D team. All content has been streamlined for improved consistency, and there is now more input on the learning day around the assessment processes of the Observed Structured Clinical Examination (OSCE) and essay. ASH Scotland and GCU have worked together to improve clarity and consistency for students enrolled to study Brief Advice, and there are plans to review the two other modules (subject to the outcome of a Training Standards review).

Needs assessments are currently being carried out for mental health workers and cessation in pregnancy services, with the possibility of training packages being developed in those fields. Further information about all training resources is available via the ASH Scotland website at <http://www.ashscotland.org.uk/ash/3963.html>.

Youth Development

Emma Cepok, Youth Development Officer, co-ordinates the Youth and Tobacco Forum (a Scottish Tobacco Control Alliance (STCA) group). The Forum gives members an opportunity to network, share practice and discuss issues; the STCA's website also enables members to access more youth-related documents.

The NHS Health Scotland/ASH Scotland briefing paper on the lessons from the Young Peoples' Smoking Cessation pilots, to which Emma contributed, was disseminated broadly by Health Scotland through a range of networks and directly to Forum members at their meeting in January this year. The most recent Forum meeting, which took place in Glasgow on 24th April, focussed on how to involve young people in tobacco control (with a look at evidence from previous projects), and also explored training issues relating to smoking cessation for those working with young people. More information can be found on the STCA's web pages at <http://www.ashscotland.org.uk/ash/3357.html>.

Research and Evaluation

Rory Morrison, Research and Evaluation Officer, is a member of the Minimum Dataset Expert Review Group (composed of representatives from Cessation Services, NHS Health Scotland, ASH Scotland and the Scottish Government). A report of the group's work to date was presented to the Minimum Dataset Project Board in February, and circulated to Smoking Cessation Co-ordinators for review.

Pending further consultation on selected items with Co-ordinators in April, the final recommendations of the group will be complete by June, with the changes to the dataset and database being implemented to coincide with the start of the next recording year - January to December 2009.

A Message from ASH Scotland's Chief Executive



We know that people living in poorer communities are twice as likely to smoke as those in affluent areas. As the new Chief Executive of ASH Scotland, one of my priorities will be to highlight the widening health inequalities for Scots in disadvantaged areas. We'll continue to call for new investment in smoking cessation services to be targeted at the areas which need it most.

The eleven PATH Support Fund projects have shown originality and success in engaging with traditionally 'hard to reach' groups. It is clear to me that not only can we learn from those projects, but that their experience should be shared with other areas facing similar challenges. Many of these projects could be rolled out to other parts of Scotland, particularly to areas facing disadvantage.

I am delighted that many of the service-delivery projects which received funding were mainstreamed into local service provision. But smoking cessation is still inadequately resourced, and in real terms the funding set aside for it over the next three years will decline.

Smoking is Scotland's biggest preventable killer, and the NHS in Scotland spends more than £200 million on treating tobacco-related illnesses every year. Putting money into cessation services now will reduce that bill in future years.



Sheila Duffy
Chief Executive
ASH Scotland

PATH - Further Work

ASH Scotland's Projects Officer continues to disseminate the work of all the Support Fund projects, and shall be collaborating with colleagues from the Tobacco & Inequalities fund to ensure that evidence of innovative and/or good practice is distilled into a publication which will be available for anybody wishing to set up similar projects or services.

For enquiries relating to the Support Fund, please contact Linda Bates (Projects Officer) on 0131 220 9481 or via lbates@ashscotland.org.uk.

Further information relating to each Support Fund project can be found on the ASH Scotland website at <http://www.ashscotland.org.uk/ash/3513.html>.