



BASSP Statement on Minimum Standards for Training for Stop Smoking Practitioners

www.brit-thoracic.org.uk/bassp

The British Association for Stop Smoking Practitioners (BASSP) is a new membership organisation run by practitioners for practitioners, launched on 2nd July 2007. BASSP is under the umbrella of the British Thoracic Society (BTS). To be eligible, individuals should have an active professional interest in stop smoking initiatives, and be committed to reducing the prevalence of smoking in the UK. Membership is not open to those employed in, or supported by, the tobacco industry, or to those gain financially from the sale of tobacco or tobacco-related products.

The aims of BASSP are to:

- Raise the profile of the profession nationally
- Improve communication between practitioners themselves and other relevant organisations
- Increase support for practitioners
- Provide representation at national, and local, levels to highlight issues pertinent to practitioners
- Share and encourage evidence-based best practice

Background to this document

As part of our commitment to raising the profile of smoking cessation as a profession, and increasing support for practitioners, we have produced the following document outlining the minimum standards for training for those working in stop smoking services.

At present, there is no UK wide guidance on training or accreditation. Therefore, BASSP felt that the production of such guidance, which would be relevant to practitioners and would move the profession forward and ensure practitioners and their employers can be confident about the training courses on offer.

We acknowledge that in Scotland, standards for smoking cessation training already exist. These were developed by Partnership Action on Tobacco and Health (PATH) which is funded by the Scottish Government and managed by ASH Scotland. There is also a PATH approval scheme and a range of accredited training courses which support these standards. Practitioners within Scotland should refer to the following website for further information: <http://www.ashscotland.org.uk/ash/3426.1008.1135.html>.

BASSP supports the view that stop smoking practitioners should endeavour to follow, and indeed contribute to, evidence-based practice. To this end, the intention of this Statement is to help to ensure practitioners receive and support quality training that will enable the profession to continue to develop and find the best ways to support those wishing to stop smoking. The current NICE guidelines on smoking cessation are relevant to practitioners not only based in England, but across the UK. The guidance can be found at www.nice.org.uk

This document has been produced by reviewing the available evidence from Scotland, England, Wales and Northern Ireland. Importantly, the draft Statement was considered and commented on by BASSP members via our website (www.brit-thoracic.org.uk/bassp). The draft resulting from this consultation was then sent to other relevant stakeholders. We feel this inclusive approach ensures the information contained in this Statement will reflect the experience of practitioners working in health care settings, both primary and secondary care, across the UK.

Summary

This Statement contains information on training for Brief Intervention and Specialist Stop Smoking Support. The document supports the view that a wide range of health professionals and professions allied to medicine can and should be trained to raise the issue of stopping smoking. However, it is important to acknowledge that specialist stop smoking professionals are necessary to support clients fully, particularly in those “hard to reach groups”.

Training for Brief Intervention

The aim of any course should be to provide participants with the basic knowledge and skills to provide opportunistic advice and information on stopping smoking. This training should be open to any health professional, or professional allied to medicine, or those whose sphere of practice brings them into regular contact with smokers, that can reasonably be expected to talk about smoking behaviour to a client. It is not unreasonable for health and social care workers, public, private and voluntary workers, including teachers, to be offered the chance to train in brief intervention. It should not be assumed that certain professional groups will already have knowledge about how to influence a client’s smoking; consultants, healthcare workers, health visitors, etc may all benefit from training.

The course should be offered by a skilled and experienced trainer who has sufficient knowledge of smoking cessation to ensure accurate and up to date information is given. The goal is to empower professionals to discuss stopping smoking with clients, and enable them to refer clients quickly and appropriately to the relevant specialist support.

What is brief intervention advice?

Brief Intervention is the opportunity health care professionals can use to motivate patients to stop smoking. All health professionals from consultants to porters should be trained to spend 3-5 minutes talking about smoking behaviour while they are interacting with patients. The aim of Brief Intervention is that the patient receives consistent messages from all health professionals which can result in a successful quit attempt for the patient. Brief Intervention involves asking the patient if they smoke. If the answer is no then the conversation can end there. If the answer is yes then the health professional can advise the patient on the specialist stop smoking services available and ask if the patient would like to be referred.

Why provide brief intervention advice?

The provision of brief advice is supported by local and national stop smoking guidance and advice (NICE, 2008). There is support for the notion that a wide range of professionals should be encouraged to talk to clients about their smoking. The real benefit to brief advice is to maximise the opportunity to move clients on in their thinking about their smoking, with the ultimate aim of encouraging and supporting a quit attempt. Training a range of health professionals in delivering brief intervention can ensure that more clients are motivated and referred onto the specialist services. It can be more effective for someone with an existing relationship with the client to initiate a discussion about smoking cessation, and then the client can be referred on as necessary. In an ideal world, brief intervention training would be incorporated into undergraduate training to enable it to be integrated fully into all healthcare professional’s practice.

Core elements:

Health professionals who have completed a training course in brief advice to stop smoking should finish the course with the core skills:

- Information about the technique and how to use it

Course participants need to understand how to raise the issue of the clients smoking sensitively, without damaging the relationship that they have with the client. They need to be able to assess from the conversation with the client what the appropriate action is to take at the time. Information given to the client and action taken should be dependent on the responses given by the client during the intervention. Clients will be at different stages; for example, some will be interested in quitting immediately, some interested in quitting but not ready at this time and some will not be interested in quitting. Courses should allow participants the opportunity to develop techniques for responding to clients at all stages.

Appreciating the importance of understanding the individual client's smoking behaviour is a key factor in influencing a quit attempt. The course should emphasise the benefits in considering nicotine intake, details of other quit attempts, current motivation levels, etc. to ensure the appropriate advice is given. It is important that clients should also be encouraged to talk about their perceived benefits of smoking and any specific barriers they see to stopping. Therefore, the use of motivational interviewing should be raised during the course, and its uses discussed

- The effects of smoking on health

During a brief intervention, the client should be helped to understand the nature of nicotine addiction and the social and behavioural aspects of smoking. The course should therefore include information about the diseases and health problems associated with smoking and include the risks of second hand smoke and smoking in pregnancy. The participant should have a basic understanding of the content of tobacco smoke, and be able to outline the effects of CO and tar as well as nicotine. It should be possible for the participant to personalise this information to any client as far as possible. The training should also include a basic outline of issues surrounding health inequalities.

- The benefits to stopping smoking

The course should explore fully the positive benefits of stopping smoking and participants should understand that these need to be stressed to the client as part of the brief intervention. Long term and short term effects should be noted. The information should be delivered in such a way during the training that it is clear how it can be tailored to the client to motivate them to make a quit attempt.

- How to support a quit attempt

Understanding the barriers to making a quit attempt is important. The course should enable the participant to make a client aware of the perceived benefits of stopping smoking altogether, rather than cutting down. Participants should understand how NRT and other pharmacological therapies can support a quit attempt. The participant should also be familiar with the use of a CO monitor as a way to motivate clients to stop smoking.

- Knowledge of specialist services and key resources

Details of specialist stop smoking services should be known, as should the process for referring clients. Participants should be aware of the role of specialist practitioners. Participants should also be aware of useful leaflets to give to clients and also other sources of advice e.g. helplines, websites, etc.

- Collecting data

Those offering brief intervention should be required to record some basic information relating to their interaction with a client. The training should encourage participants to record smoking status and that they had engaged with the client. The training course should emphasise the importance of continuity and teamwork.

- Future training

Participants should leave the course knowing how to keep their knowledge up to date, and knowing about where and when further courses are available.

Training for Specialist Stop Smoking Practitioners

Having well trained Stop Smoking Practitioners is a vital part of the nation's health service. Smoking cessation is the most cost-effective health intervention that can be offered to clients. At present there is no UK wide register of qualified stop smoking practitioners, and no accreditation scheme to support such a register. However, it should be noted that some areas may well hold details of practitioners and training courses in their localities; for example, in Scotland PATH hold a register of approved training courses.

BASSP is committed to supporting practitioners to ensure the profession develops and that the role of practitioners is recognised and valued within the health service. With stop smoking practitioners providing such an important role in promoting health, the following information outlines the key components that any training course should offer. In order to train as a Specialist Stop Smoking Practitioner, participants must first have undertaken a course in brief intervention, or brief intervention needs to be incorporated into the specialist course. The course should be delivered by a Stop Smoking Practitioner with specialist knowledge of training.

The following information does not include specific details about how the course should be delivered; BASSP recognises that those providing training will be adapting their courses for their audience and locality. The following information outlines the key elements a course should include to ensure that participants leave with a core set of competencies.

Core elements (in addition to the Brief Intervention training):

- Wider context of smoking

A specialist must understand the wider context of smoking behaviour. For example, smoking trends vary according to age, gender, socio-economic factors, etc. National and local statistics are vital to enable the smoking behaviours seen by particular services to be put into context. Information on these trends and where to find recent research and published guidelines should be covered. Training should also enable practitioners to understand how services can be targeted to specific local populations.

- Multi-disciplinary working

Brief intervention can and should be offered by a wide range of health professionals and therefore it is important that any stop smoking specialist appreciates the benefits of working as part of a wider team. However, specialists are vital to maximising quit attempts and the knowledge of the specialist is a key resource in any healthcare setting. There is an aspiration that the specialist service should be well known and used as a source of information and support to both clients and healthcare colleagues. Examples of how this can be achieved should be included in the training e.g. how to market a service and attract clients.

- The nature of tobacco use

Participants should have an awareness of the complex interaction between social, psychological, behavioural and physiological aspects of tobacco use. Issues concerning inequalities and "hard to reach groups" (e.g. those with mental health issues, young people, etc) should be noted during the course. Details of how to take a full history of the client's tobacco use should be covered, including the use of CO monitors. The specialist should also leave the course able to consider the likely dependence on nicotine and tailor advice accordingly.

- Developing a relationship with the client

Specialist stop smoking practitioners need to appreciate the importance of open communication and developing a relationship with the individual client. Specialist services will see many clients with specific needs, personal issues, and possibly some challenging behaviours. The course should impress upon the participant the importance of being aware of the client's social situation to ensure the client receives the

appropriate support. The course should include information about “resistant clients” and strategies to support them.

- Supporting a quit attempt

Information should be given to the client about the various therapies on offer to support a quit attempt. Therefore the practitioner should leave the course with a detailed understanding of the use of pharmacological therapies and, if needed, should be able to help the client choose the most appropriate therapy. Knowledge of which therapies are available in which local areas is key.

The course must provide accurate and up to date information on the evidence and effectiveness for each type of treatment, as well as details of any contraindications and side effects. Withdrawal symptoms should be addressed and the practitioner should be able to help the client with suggested strategies to manage these. It is important that practitioners are aware of other lifestyle issues, e.g. smoking and weight control, stress management. Alcohol, other drug use or concurrent addictions needs to be considered. The historical use of tobacco should also be addressed, e.g. smoking has in the past been associated with helping those with mental health problems.

There are a variety of methods that can be adopted by Specialist Stop Smoking Practitioners. Sometimes interventions are made in small groups; group training should be part of a specialist course. Course leaders should discuss the various techniques that are available to practitioners and be aware of additional training needs.

- Lapse and Relapse

The course needs to provide information to the participant that reflects a client’s genuine experience of a quit attempt. An understanding of lapse (one or two cigarettes) versus a relapse (returning to something close to the previous smoking pattern) needs to be understood.

It is important that the practitioner leaves the course understanding that lapse and relapse is a part of the normal process, and should be viewed as a positive learning experience. It is important that practitioners are encouraged to realise the benefit of developing a relationship with the client whereby the client can be honest and open, and importantly re-enter the service should they relapse. Triggers associated with relapse should be addressed, not least to help the client understand the nature of their tobacco use. The participants should be made aware of the advantages of agreeing a programme of support so that the client has realistic expectations about how the practitioner can help.

- Audit and evaluation

Practitioners should be encouraged to collect and monitor data – this is a requirement for many services, but it should also be considered a valuable aid to professional development and planning. Participants in all courses should be aware of the various audit systems in their own localities.

This Statement was prepared by the BASSP Management Committee. The Statement was sent to all BASSP members and was available on the BASSP website for comment. A consultation process with other relevant stakeholder organisations was undertaken, and the development of this Statement has been supported by ASH England, ASH Scotland, the British Thoracic Society, the Royal College of Physicians Tobacco Group and QUIT.