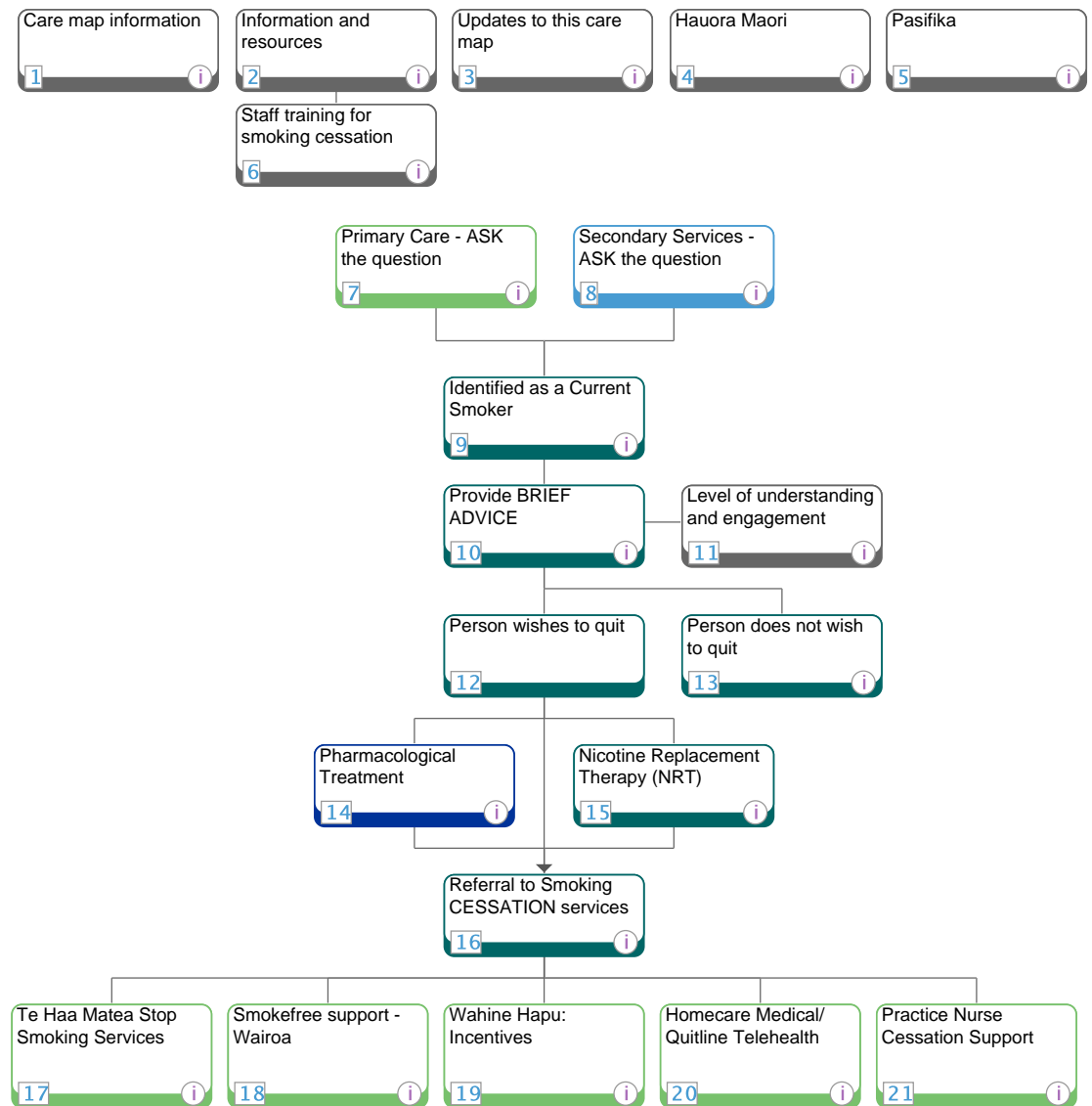


# Smoking Cessation ABCD

Medicine > Respiratory > Smoking cessation

- i Information
- R Referral
- N National info
- L Local info
- Note
- Primary care
- Secondary care
- Shared care
- Formulary
- Information



# Smoking Cessation ABCD

Medicine > Respiratory > Smoking cessation

## 1 Care map information

Quick info:

In Scope:

- smoking cessation conversations with people
- ≥12 years of age
- use of pharmacological treatments including:
  - nicotine replacement therapy (NRT)

Out of scope:

- cessation advice regarding drugs except for tobacco
- <12 years of age

Smoking cessation is a Ministry of Health priority area. The ABCD prompts health care workers to:

- **Ask** about and document every person's smoking status
- give **Brief advice** to stop to every person who smokes (every patient, every time)
- strongly encourage every person who smokes to use **Cessation support** (a combination of behavioural support and smoking cessation medicine works best) and offer them help to access it. **Refer to, or provide, cessation support to everyone who accepts that offer**
- **Document** in either the primary care dashboard or the secondary care screening form

**Ministry of Health Target (July 2016/17):**

- **95 percent** of hospital patients who smoke and are seen by a health practitioner in a public hospital are offered brief advice and support to quit smoking
- **90 percent** of PHO enrolled patients who smoke have been offered help to quit smoking by a health care practitioner in the last 15 months
- **90 percent** of pregnant women who identify as smokers upon registration with a DHB-employed midwife or Lead Maternity Carer are offered brief advice and support to quit smoking

Within the target, a specialised identified group includes:

- progress towards 90% of pregnant women who identify as smokers at the time of confirmation of pregnancy in general practice or booking with Lead Maternity Carer are offered advice and support to quit [1]

References:

1. Ministry of Health 2010: tobacco use in New Zealand: key findings from the 2009 New Zealand tobacco use survey. Wellington: Ministry of Health
2. Ministry of Health. 2014. Background and Recommendations of the New Zealand Guidelines for Helping People to Stop Smoking. Wellington: Ministry of Health. ISBN 978-0-478-42823-0
3. Glover M, Cowie N 2010: increasing delivery of smoking cessation treatments to Maori and Pacific smokers. New Zealand Medical Journal 123(1308): 6-8.

## 2 Information and resources

Quick info:

**HBDHB Smokefree services:**

- phone 06 878 8109 ext. 2472
- fax 06 873 2178
- email [smokefreeservice.hastings@hbdhb.govt.nz](mailto:smokefreeservice.hastings@hbdhb.govt.nz)

**Quitline resources:**

- [The Quit Book](#) to support them on their journey to becoming non-smokers
- [Beat the Smoking Addiction handout \(Quitline\)](#)

**Maori language resources:**

- [Me Mutu Tatou - Let's all Quit \(Quitline\)](#)

**Samoan language resource**

- [E fa'aapefea le fa'aaogaina o fasi nikotini | E fa'aapefea le fa'aaogaina o pulu po o lole](#) (How to use patches, gum and lozenges)

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# Smoking Cessation ABCD

Medicine > Respiratory > Smoking cessation

## Tongan language resources:

- [Founga hono ngaue'aki 'o e palasita nikotini' | Founga hono ngaue'aki 'o e pululole' pe lole'](#) (How to use patches, gum or lozenges)

## Other sources of information:

- [Why quit smoking?](#)
- medications to assist smoking cessation - [patient flyer](#)
- [relapse prevention strategies](#)

## Quit Plans:

Download [Quit Plan information](#) for patients: preparation is key to a successful quit attempt.

**Second-hand smoke:** Children's exposure to [second-hand smoke](#)

## Language translation assistance:

HBDHB Interpreting Service. To make an appointment (charges may apply):

- phone 06 878 8109 ext. 5805 or
- email [interpreting@hawkesbaydhb.govt.nz](mailto:interpreting@hawkesbaydhb.govt.nz)

These websites may help with simple words and phrases:

- [Babelfish](#)
- [Google translate](#)

[Language Line](#). Professional interpreters are available, free of charge, for telephone-based sessions (44 languages are supported):

- Phone 0800 656 656
- Monday - Friday 9am - 6pm
- Saturday 9am - 2pm

Bookings are not usually necessary. For longer consultations (for example, a nurse consultation for a newly diagnosed person) it is best to make a booking at least 24 hours in advance by calling the above number or emailing [language.line@dia.govt.nz](mailto:language.line@dia.govt.nz) and providing your contact details and a summary of the service you require (time and date of the meeting, language, approximate length of the appointment, gender of interpreter (if relevant)).

## 3 Updates to this care map

### Quick info:

Date of publication: October 2015.

Review date: October 2016.

**Date of review and republication:** August 2017

Date of next review: August 2018

This care map has been developed in line with consideration to evidenced based guidelines. For further information on contributors and references please see the Pathway's Provenance Certificate.

NB: This information appears on each page of this care map.

## 4 Hauora Maori

### Quick info:

Maori are a diverse people and whilst there is no single Maori identity, it is vital practitioners offer culturally appropriate care when working with Maori whanau. It is important for practitioners to have a baseline understanding of the issues surrounding Maori health. This knowledge can be actualised by (not in any order of priority):

- considering the importance of introductions ('whanaungatanga') - a process that enables the exchange of information to support interaction and meaningful connections between individuals and groups. This means taking a little time to ask where this person is from or to where they have significant connections
- asking Maori people if they would like their whanau or significant others to be involved in assessment and treatment
- asking Maori people about any particular cultural beliefs they or their whanau have that might impact on assessment and treatment of the particular health issues

# Smoking Cessation ABCD

Medicine > Respiratory > Smoking cessation

## Maori health services

HBDHB contracts Maori health providers to deliver community based nursing and social support services. Practitioners should discuss, where appropriate, information about relevant Maori health services. A referral to one of these providers may assist Maori people to feel more comfortable about receiving services following discussions.

### Central Hawke's Bay:

#### [Central Health](#)

Cnr Herbert & Ruataniwha Streets, Waipukurau

Phone: 06 858 9559 Fax: 06 858 9229

Email: [reception@centralhealth.co.nz](mailto:reception@centralhealth.co.nz)

#### [Referral Form](#)

### Hastings:

#### [Te Taiwhenua o Heretaunga](#)

821 Orchard Road, Hastings 4156

Phone: 06 871 5350 Fax: 06 871 535

Email: [taiwhenua.heretaunga@ttoh.iwi.nz](mailto:taiwhenua.heretaunga@ttoh.iwi.nz)

#### [Referral Form](#)

### [Kahungunu Health Services](#) (Choices)

500 Maraekakaho Road, Hastings

Phone: 06 878 7616

Email: [kahungunu@paradise.net.nz](mailto:kahungunu@paradise.net.nz)

#### [Referral Form](#)

### Napier:

#### [Te Kupenga Hauora](#)

5 Sale Street, Napier

Phone: 06 835 1840

Email: [info@tkh.org.nz](mailto:info@tkh.org.nz)

#### [Referral Form](#)

### Wairoa:

Kahungunu Executive (no website)

65 Queen Street, Wairoa 4108

Phone: 06 838 6835 Fax: 06 838 7290

Email: [kahu-exec@xtra.co.nz](mailto:kahu-exec@xtra.co.nz)

### Secondary care Maori Health Services:

Hawke's Bay DHB - Te Wahanga Hauora Maori Health Services

Phone: 06 878 8109 ext. 5779, 06 878 1654 or 0800 333 671 Email: [admin.maorihealth@hawkesbaydhb.govt.nz](mailto:admin.maorihealth@hawkesbaydhb.govt.nz)

## Further Information

Practitioners should be versed in the knowledge of:

- historical overview of legislation that impacted on Maori well-being
- Maori models of health, such as [Te Whare Tapa Wha](#) and Te Wheke when working with Maori whanau
- national Maori Health Strategies:
  - **Mai Maori Health Strategy 2014-2019** - [Full file](#) or [Summary diagram](#)
  - **He Korowai Oranga**: Maori Health Strategy - sets the [Government's overarching framework](#) to achieving the best health outcomes for Maori
- local [Hawke's Bay health sector's strategies and initiatives](#) for improving Maori health and wellbeing
- [Medical Council of New Zealand competency standards](#)

# Smoking Cessation ABCD

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## Cultural Competency Training

Training is available through the Hawke's Bay DHB to assist you to better understand Maori culture and to better engage with Maori people. Contact the coordinator

Email: [education@hbdhb.govt.nz](mailto:education@hbdhb.govt.nz) to request details of the next courses.

## 5 Pasifika

Quick info:

Pacific people value their culture, language, families, education and their health and wellbeing. Many Pacific families have a religious affiliation to a local church group.

The Pacific people are a diverse and dynamic population:

- more than 22 nations represented in New Zealand
- each with their own unique culture, language, history, and health status
- share many similarities which we have shared with you in order to help you work with Pacific people more effectively
- for many families language, cost and access to care are barriers

Pacific ethnic groups in Hawke's Bay include Samoa, Cook Islands, Fiji, Tonga, Niue, Tokelau, Kiribati and Tuvalu. Samoan and Cook Island groups are the largest and make up two thirds of the total Pacific population. There is a growing trend of inter-ethnic relationships and New Zealand born Pacific populations.

Acknowledge [The FonaFale Model](#) (Pacific model of health) when working with Pacific people and families.

General guidelines when working with Pacific people and families (information developed by Central PHO, Manawatu):

- [Cultural protocols and greetings](#)
- [Building relationships](#) with your Pacific people
- [Involving family support and religion](#) during assessments and in the hospital
- [Home visits](#)

### Hawke's Bay-based resources:

- [HBDHB interpreting service website](#) or phone 06 8788 109 ext. 5805 (no charge for the hospital; charges may apply for community-based translations) or contact coordinator at [interpreting@hbdhb.govt.nz](mailto:interpreting@hbdhb.govt.nz)
- Pacific Navigation Services Ltd Phone: 027 971 9199
- services to assist Pacific people to access healthcare ([SIA](#))
- [Improving the Health of Pacific People in Hawke's Bay](#) - Pacific Health action Plan

### Ministry of Health resources:

- [Ala Mo'ui](#) Pathways to Pacific Health and wellbeing 2014-2018
- [Primary Care for Pacific people](#): a Pacific and health systems approach
- Health education resources in [Pacific languages](#) (links to a web page where you can download resources)

## 6 Staff training for smoking cessation

Quick info:

**Training is available to Primary and Secondary care health workers.**

**Inspiring Workforce Development and Training** (Unregistered healthcare workers):

['The Stop Smoking Practitioners' Qualification'](#)

- national certificate in health, disability and aged support: core competencies (Level 3)
- complete 4 modules in 8 months
- Email: [nts@inspiring.org.nz](mailto:nts@inspiring.org.nz)

**Ministry of Health** (Registered healthcare workers)

Compulsory training for registered healthcare workers providing smoking cessation advice, this e-learning course covers the revised guidelines (2014):

# Smoking Cessation ABCD

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- Register by [logging in or creating an account](#) and then searching for 'smoking cessation' in the course catalogue. Before you start the e-learning course 'Helping People to Stop Smoking' download the copies of the New Zealand Guideline '[Helping People to Stop Smoking](#)' and the '[Guide to Prescribing Nicotine Replacement Therapy \(NRT\)](#)'
- The e-learning course should be repeated every three years or when the Guidelines have been updated.

**On-Going Professional Development** (Registered and unregistered healthcare workers)

## Ko Awatea

Online e-learning via Ko Awatea will allow you to access the NRT resources and information.

If you require help with Ko Awatea contact HBDHB Education Centre:

- phone 06 878 8109 ext 2708
- email [education@hbdhb.govt.nz](mailto:education@hbdhb.govt.nz).

The Four e-learning courses available on Ko Awatea are:

- HBDHB Standing Orders for Nicotine Replacement therapy
- Smokefree Training for the Mental Health & Addiction Workforce (Both registered and unregulated healthcare workers)
- Optimising Nicotine Replacement Therapy in Clinical Practice (primary sector)
  - For further information contact HBDHB Smokefree services:
    - phone 06 878 8109 ext 2472
    - fax 06 873 2178
    - email [smokefreeservice.hastings@hbdhb.govt.nz](mailto:smokefreeservice.hastings@hbdhb.govt.nz)
- Safe Sleep Principles (Both registered and unregulated healthcare workers)

**Nurse Practice Portfolios** (Registered healthcare workers)

The use of smokefree competency evidence can be used throughout the Domains, e.g. 2.1 – provides planned nursing care to achieve identified outcomes. e.g. planned nursing care follows the processes outlined in the HBDHB Smokefree Service procedures.

- supporting evidence could include a copy of clinical documentation which specifically identifies interventions, education etc or a copy of documented evidence of use of NRT such as a Quitcard, written case study or an exemplar/reflective with learnings and validated where possible.

**Useful Websites:**

- [Quitline](#)
- [Action of Smoking and Health New Zealand](#)
- [Smokefree Coalition](#)
- [The Cancer Society](#)
- [Toi Tanagata](#)

## 7 Primary Care - ASK the question

Quick info:

### Primary Care Presentation

Refer to [Patient Dashboard](#)

**ASK about and DOCUMENT every person's smoking status [2].**

Record 'ABC' in the person's clinical notes and complete the [Patient Dashboard](#) and Smokefree People Advanced Form as this will automatically populate READ codes.

**ALWAYS document in the person's clinical notes.**

**READ Codes definitions:**

- 1371 - non-smoker has smoked fewer than 100 cigarettes in their lifetime
- 137R - current smoker has smoked more than 100 cigarettes in their lifetime and has smoked tobacco in the last 28 days
- 137S - ex-smoker has smoked more than 100 cigarettes in their lifetime, but has not smoked any tobacco in the last 28 days

References:

2. Ministry of Health. 2014. Background and Recommendations of the New Zealand Guidelines for Helping People to Stop Smoking. Wellington: Ministry of Health. ISBN 978-0-478-42823-0

# Smoking Cessation ABCD

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## 8 Secondary Services -ASK the question

Quick info:

### HBDHB Secondary Services

**ASK about and DOCUMENT every person's smoking status [2].**

Record 'ABC' on any person who is admitted that is  $\geq 15$  years of age using [Smokefree Adult Screening and Intervention](#)

Record 'ABC' on any person who is admitted that is  $< 15$  years of age using [Smokefree Baby/Child Screening and Intervention](#)

NB: Emergency Department is required to complete the forms for all people who present.

## 9 Identified as a Current Smoker

Quick info:

A current smoker is someone who has smoked more than 100 cigarettes in their lifetime and has smoked tobacco in the last 28 days.

Everyone who smokes should be advised to quit:

- advice to stop smoking should be sensitive to the individual's preferences, needs and circumstances
- people who smoke should be asked how interested they are in quitting
- people who are not ready to quit should be:
  - asked to consider the possibility
  - encouraged to seek help in the future

### Documentation

#### General Practitioner/medical centres:

- update the person's dashboard and/or the Smokefree People Advanced Form (every patient, every time)
- primary care **READ** code:
  - 137R - current smoker

#### Secondary Services

At every presentation, document responses in clinical records by completing the appropriate Smokefree screening forms:

- [Smokefree Adult Screening and Intervention](#)
- [Smokefree Baby/Child Screening and Intervention](#)

## 10 Provide BRIEF ADVICE

Quick info:

**All doctors and health care workers should provide brief advice to stop smoking at every opportunity to every person they see who smokes.**

You can give this advice in 30 seconds and, where possible, tailor your advice to the person in front of you. Advice could be health or financially related.

The ABCD prompts health care workers to:

- **Ask** about smoking status
- provide **Brief advice** every time a person presents
- strongly encourage the person to use **Cessation support**, a combination of behavioural support and smoking cessation medicine works best. **Refer to, or provide, cessation support to everyone who accepts that offer**
- **Document** in either the primary care dashboard or the secondary care screening form

### Pregnant women are a key population of concern for Hawke's Bay.

All health care workers who have contact with a pregnant woman who smokes should:

- provide ABCD
- repeat the advice regularly throughout the pregnancy if the woman continues to smoke:
  - try presenting it as protecting the unborn child, this is a strong motivator for pregnant women to become smokefree
  - alternatively try presenting it as a way of protecting children and young people from exposure to [second-hand smoke](#)

# Smoking Cessation ABCD

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- offer the partner and wider whanau ABCD and encourage a referral to cessation support

## Documentation

### General Practitioner/medical centres:

- update the [patient dashboard](#) and the Smokefree People Advanced Form (every patient, every time)

- **primary care READ code:**

- @ZPSB.10 - brief advice given

### Secondary Services

At every presentation to secondary services, document their response in their clinical records by completing the appropriate Smokefree screening forms:

- [Smokefree Adult Screening and Intervention](#)
- [Smokefree Baby/Child Screening and Intervention](#)

## 11 Level of understanding and engagement

### Quick info:

Apply health literacy principles

Ask what the person understands:

- build on what the person already knows
- translate medical terminology into lay language
- draw diagrams or write key phrases and messages down and give it to the person to take with them
- provide educational material

Consider the person's:

- familiarity with medical terminology and knowledge
- language of origin
- hearing impairment
- cultural background and belief systems
- anxiety or extreme emotional intensity

Address any issues regarding understanding and engagement.

Consider barriers to effective care:

- factors that could stop the person from getting further help
- whanau, family and social network dynamics:
  - whanau support, family history
  - family obligations including dependents
  - work responsibilities
  - whanau, hapu and iwi obligations
  - community engagement and obligations or responsibilities
- locality and geographical access to health and hospital services
- socio-economic factors including source of income

## 13 Person does not wish to quit

### Quick info:

For people who do not wish to quit.

Possible causes:

- contented smoker e.g. smoker does not want to stop, are substance dependent
- previous failed attempts to quit:
  - ask the person for more details e.g. previous relapses
  - may be due to insufficient or incorrect use of pharmacological treatments



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- person may be unaware of newer types of nicotine replacement therapy (NRT) which may be able to help
- lack of information
- fear of withdrawal symptoms
- do not feel they can stop:
  - ask about personal circumstances
  - living with people who smoke
  - stress at home or work
  - mental health problems
- fear of weight gain
- distrust of medical profession
- fear of being diagnosed with smoking-related illness, especially lung cancer

Provide smokers with brief, supportive and personalised advice about stopping, especially those in high risk populations and those who:

- care for or who have children
- suffer from cardiovascular or pulmonary disease
- have diabetes mellitus (DM)
- are pregnant or breastfeeding
- emphasise the dangers of second-hand smoke to family and loved ones
- reassure the person that stopping smoking is a process that takes time and involves progression through many stages, for which help is available
- help and support will be readily available should they wish to stop smoking

## 14 Pharmacological Treatment

Quick info:

A combination of behavioural support and stop-smoking medicine works best. Encourage the person to accept smoking cessation support.

When delivering the treatment for those that accept the offer of smoking cessation support either:

- refer to smoking cessation services
- provide smoking cessation support

[Bupropion](#)

- adult (18 years and over) start 1–2 weeks before target stop date, initially 150 mg daily for 3 days then 150 mg twice daily (maximum single dose 150 mg, maximum daily dose 300 mg; minimum 8 hours between doses)

[Norriptyline](#)

- adult (18 years and over) start 10–28 days before target stop date, initially 25 mg daily, increased gradually (over 10 days to 5 weeks) to 75–100 mg for up to 3–6 months; taper dose slowly on discontinuation

[Varenicline\\*\\*](#) (Champix)

- adult (18 years and over) starting usually 1–2 weeks before target stop date, initially 500 micrograms once daily for 3 days, increased to 500 micrograms twice daily for 4 days, then 1 mg twice daily for 11 weeks (reduce to 500 micrograms twice daily if not tolerated); 12-week course can be repeated in abstinent individuals to reduce risk of relapse
- suggested [consultation and follow-up procedure](#) for patients on Champix

\*\* There are funding restrictions for the drug. [To learn more go to the pharmaceutical schedule website.](#)

Download a [patient flyer](#) on these medicines.

## 15 Nicotine Replacement Therapy (NRT)

Quick info:

A combination of behavioural support and stop-smoking medicine works best. Encourage the person to accept smoking cessation support.

When delivering the treatment for those that accept the offer of smoking cessation support either:

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# Smoking Cessation ABCD

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- refer to smoking cessation services
- provide smoking cessation support

[Nicotine Replacement Therapy](#)

[Ministry Guide to Prescribing NRT](#)

## Documentation

### General Practitioner/medical centres:

- update the person's dashboard and/or the Smokefree People Advanced Form (every patient, every time)
- primary care **READ** code:
  - @ZPSC.20 - prescribed Med
  - @ZPSC.30 - provided cessation
  - @ZPSC.90 - declined cessation

### Secondary Services

At every presentation, document responses in clinical records by completing the appropriate Smokefree screening forms:

- [Smokefree Adult Screening and Intervention](#)
- [Smokefree Baby/Child Screening and Intervention](#)

## 16 Referral to Smoking CESSATION services

Quick info:

### Offer cessation support:

Strongly encourage every person who smokes to use cessation support (a combination of behavioural support and stop-smoking medicine works best) and offer to help them access it. Refer to, or provide, cessation support to everyone who accepts your offer.

Stop-smoking interventions for Maori need to be delivered in a way that is culturally appropriate and inclusive of whanau as much as possible.

It is also important to give Maori who smoke a choice of different treatment options [3].

### Documentation

#### General Practitioner/medical centres:

- update the [patient dashboard](#) and the Smokefree People Advanced Form (every patient, every time)
- primary care READ code:
  - @ZPSB.10 - referral provided

### Secondary Services

At every presentation to secondary services, document their response in their clinical records by completing the appropriate Smokefree screening forms:

- [Smokefree Adult Screening and Intervention](#)
- [Smokefree Baby/Child Screening and Intervention](#)

Reference:

3. Glover M Cowie N 2010: increasing delivery of smoking cessation treatments to Maori and Pacific smokers. New Zealand Medical Journal 123 (1308):6-8.

## 17 Te Haa Matea Stop Smoking Services

Quick info:

Four Hawke's Bay organisations have joined forces to focus on the goal of a Smokefree Aotearoa by 2025.

General Practitioners and Practice Nurses can provide smoking cessation support.

### Te Haa Matea Stop Smoking Services:

- Toll free - 0800 300 377 for assistance

**Te Haa Matea Stop Smoking services will triage all referrals and allocate to appropriate cessation provider.**

Stop Smoking services - free NRT and cessation support programme

# Smoking Cessation ABCD

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## 18 Smokefree support - Wairoa

Quick info:

General Practitioners and Practice Nurses can provide smoking cessation support.

**Quit card provider and cessation support:**

- **Kahungunu Executive**
  - cessation free service
  - home visits available
  - phone - 06 838 6835
- **Waikaremoana support via Kahungunu Executive:**
  - cessation free service
  - home visits available
  - phone - 06 838 6835
- **Te Hauora o Te Wheke A Nuku Mahia via Kahungunu Executive:**
  - cessation free service
  - home visits available
  - phone - 06 838 6835 or 06 837 5649
- **Ngati Pahauwera Hauora:**
  - cessation free service
  - home visits available
  - phone - 06 837 6766
- **Wairoa Hospital Smokefree service**
  - cessation free service
  - phone - 06 838 7099 ext 4900
  - mobile - 027 7162 658
- **Queen Street practice:**
  - **enrolled people only - no charge**
  - phone - 06 838 8333
- **Wairoa Medical Centre:**
  - **enrolled people only - no charge**
  - phone - 06 838 9728
- **Wairoa Health Care Centre:**
  - **enrolled people only - no charge**
  - phone - 06 838 9739

**Quitline and Text2Quit services refer to Homecare Medical/Quitline telehealth node**

## 19 Wahine Hapu: Incentives

Quick info:

Wahine Hapu: Incentives for pregnant women and whanau members.

All pregnant women or postnatal women up to 6 months and whanau members related to the baby are entitled to the incentives. This is delivered by Kahungunu Health Services - Choices in conjunction with the HBDHB Smokefree service.

**Incentives outline**

Initial visit, face to face:

- Breathe carbon monoxide (CO) starting reading

Compulsory face to face visits at:

- 1 week - CO monitor reading taken
- 4 weeks - CO monitor reading taken

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- 8 weeks - CO monitor reading taken
- 12 weeks - CO monitor reading taken

Weeks:

- 2, 3, 5, 6, 7, 9, 10, 11 can be face to face, phone or text

One is considered to be smokefree if the CO reading is 4 CO ppm or less.

If the woman/whanau member is smokefree, incentives include:

- nappies for the pregnant woman
- food vouchers for whanau and are provided at face to face visits

**NB:** Food vouchers are specific for fruit, vegetables and meat only.

## 20 Homecare Medical/ Quitline Telehealth

Quick info:

Homecare Medical is a national telehealth service to the public 24/7. Quitline is one of the telehealth services.

Phone: 0800 778 778

Quitline Services at a Glance:

- Quitline Advisors offer free advice support to help people to quit smoking. Phone lines are open 8am-9.30pm weekdays and 10am-7.30pm Sundays
- [Quit Blogs](#): people can join the blog community and get support from others who are also quitting smoking
- [Quit Stats](#): People can see how much money they're saving with their very own real-time Quit Stats
- [Txt2Quit](#): People can join Txt2Quit and they will send them quitting tips and support straight to their mobile phone
- [Quit Plan](#): People can create their own Quit Plan to help them on their smokefree journey. They can follow the steps online or talk to an advisor on the phone 0800 778 778
- Nicotine Replacement Therapy(NRT): people can order subsidised NRT over the phone and [online](#) or 0800 778 778

People can be referred to Quitline via [myPractice PMS](#) or via the [Medtech PMS](#)

Hospital staff can refer patients directly to Quitline by completing the [Referral Form](#) or by referring the patient to the hospital Smokefree Service: Extension 2472 or complete and fax the [Internal Smokefree Referral form](#) on Nettie under Smokefree Resources.

At every **admission to hospital**, document the patient's response in their clinical records by completing the appropriate Smokefree Screening forms:

- [Smokefree Baby/Child Screening and Intervention](#)
- [Smokefree Adult Screening and Intervention](#)

**General Practitioner/medical centres:** update the patient Dashboard and or the Smokefree People Advanced Form (every patient, every time).

## 21 Practice Nurse Cessation Support

Quick info:

Some GP Practices may choose to provide further cessation support through their own resources (follow-up phone calls, group-based treatment, walk-in clinics, additional face to face appointments etc).

This will vary from practice to practice.

Consider sharing information on [relapse prevention strategies](#) with the person.

## Smoking Cessation Provenance Certificate

### Overview

This document describes the provenance of Hawke's Bay's District Health Board's Smoking Cessation Pathway. It was developed in October 2015 and first published in October 2016. This certificate is for the review of the pathway.

The Collaborative Pathways programme is one initiative stemming from the *Transform and Sustain* agenda. The main aims of CCP are to:

- Identify opportunities to improve how health and disability care is planned and delivered within the district to improve patient access to a wider range of health services that are both closer to home and reduce avoidable hospital admissions.
- Provide health professionals throughout the Hawke's Bay district with best practice, evidence-based clinical pathways that are available at the point of care.

Outcomes we expect to achieve include faster access to definitive care, improved health equity and outcomes, better value from publically-funded resources, and better patient experience through clear expectations, improved access and greater health literacy. These outcomes are clearly aligned to the NZ healthcare *Triple Aim* and *Better, Sooner, More Convenient* policy directions.

### To cite this pathway, use the following format:

- Map of Medicine – Hawke's Bay View / Respiratory / Smoking Cessation / Smoking Cessation ABCD

### Editorial methodology

This Pathway was based on high-quality information and known Best Practice guidelines from New Zealand and around the world including Map of Medicine editorial methodology. It was developed by individuals with front-line clinical experience (see Contributors section of this document) and has undergone consultation to gain feedback and input from the wider clinical community.

Map of Medicine Pathways are constantly updated in response to new evidence. Continuous evidence searching means that Pathways can be updated rapidly in response to any change in the information landscape. Indexed and grey literature is monitored for new evidence, and feedback is collected from users year-round. The information is triaged so that important changes to the information landscape are incorporated into the Pathways through the quarterly publication cycle.

An update to this Pathway is scheduled every 12 months after first publication. However, feedback is welcomed at any time, with important updates added at the earliest opportunity within the Map of Medicine publishing schedule (the third Friday of each month).

## References

This Pathway has been developed according to the Map of Medicine editorial methodology. Its content is based on high-quality guidelines and practice-based knowledge provided by contributors with front-line clinical experience. Feedback on this Pathway was received from stakeholders during a consultation process.

1	Ministry of Health 2010: tobacco use in New Zealand: key findings from the 2009 New Zealand tobacco use survey. Wellington: Ministry of Health
2	Ministry of Health. 2014. Background and Recommendations of the New Zealand Guidelines for Helping People to Stop Smoking. Wellington: Ministry of Health. ISBN 978-0-478-42823-0
3	Glover M, Cowie N 2010: increasing delivery of smoking cessation treatments to Maori and Pacific smokers. New Zealand Medical Journal 123(1308): 6-8.

## Contributors

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## Disclaimers

### Clinical Pathways Steering Group, Hawke's Bay DHB and Health Hawke's Bay – Te Oranga Hawke's Bay

It is not the function of the Clinical Pathways Steering Group, Hawke's Bay DHB and Health Hawke's Bay – Te Oranga Hawke's Bay to substitute for the role of the clinician, but to support the clinician in enabling access to know-how and knowledge. Users of the Map of Medicine are therefore urged to use their own professional judgement to ensure that the patient receives the best possible care. Whilst reasonable efforts have been made to ensure the accuracy of the information on this online clinical knowledge resource, we cannot guarantee its correctness and completeness. The information on the Map of Medicine is subject to change and we cannot guarantee that it is up-to-date.