

| Appendix 12: Quit Your Way Service questions and answers | | |
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| | Question | Answer |
| 1. | A client has been through the service several times in quick succession and you feel that they are not motivated to quit , even though they keep telling you they are. What can you do? | Assess each case individually. Options may include the client coming back after a break or linking with non-pharmacy specialist smoking cessation services, contact details can be found in Smoking Cessation Guidelines. Consider using varenicline if suitable. |
| 2. | How soon can a client sign up to a new quit attempt ? | There is no set time between quit attempts, but make sure the client is motivated to quit before signing them up again. Clients can start a new quit attempt at any time in the same pharmacy. If one attempt is closed wait until the following Friday to restart. This allows the PCR to upload the data successfully. The client cannot start a quit at a different pharmacy within 12 weeks of the quit date of their last quit attempt. |
| 3. | If a client does not live in the NHS GGC area can they still access the service? | Yes, as long as they can commit to 12 weeks support, as this is a Scotland wide service. |
| 4. | The client's CO reading is high but they insist they have not been smoking? | Repeat the CO reading and if it still remains high, test the CO monitor on a non-smoking staff member. If the monitor is not faulty, remember that CO can be inhaled from faulty appliances in the home or car. Advise the client to investigate the source of the carbon monoxide as exposure to high levels of carbon monoxide are life threatening. Check for faulty gas appliances or car exhaust. |
| 5. | Who can receive dual NRT ? | Clients smoking 20 or more cigarettes a day (unless pregnant, trying for a baby or allergic to NRT patches). Supply Nicotinell 21mg patch and a small pack of 2 nd NRT product. Review the need for the second product on a weekly basis. |
| 6. | Can dual therapy be used for the full 12 weeks? | Yes. Review what is required on a weekly basis. |
| 7. | If client is still smoking at week 4 , can they continue on the service? | If client is still smoking at week 4 the quit attempt should be completed as 'smoker' and 'Assessment Completion' on PCR completed. If they wish to have another quit attempt the pharmacy should make sure that the client is motivated to quit. See answer to Question 2 re: timings. |

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| 8. | Client is coming to the end of the programme and feels that they may struggle when the programme ends? | Encourage the client, advising that they are a non-smoker and have done really well. Suggest that they buy a short acting product e.g. mini-lozenges or something else and only take at the difficult times. |
| 9. | Can client receive 2 weeks worth of pharmacotherapy at one time? | Yes, if going on holiday for up to 2 weeks maximum or when receiving 2 weeks starter varenicline pack. Supply of more than one week can also be considered during Covid-19 restrictions |
| 10. | If a client fails to return to pharmacy what should be done and how should this be recorded on PCR? | Pharmacy staff should attempt to contact the client by phone to find if they are smoking or not. At least 3 attempts should be made. Record these in the smoking cessation support tool in PCR. If the client is not contacted for the 4 or 12 week follow up record as 'lost to follow up' and submit the MDS to allow payment. Clients lost to follow up at 12 weeks can be followed up by the QYW team provided they have been recorded as a non smoker at week 4. If they have stopped smoking, they can be recorded as non-smokers by the QYW team. |
| 11. | Can pharmacies take on pregnant clients , or should they be referred to QYW Pregnancy Service? | Ideally, pregnant clients should be referred to QYW Pregnancy Service by phoning 0141 201 2335. However, if this is not suitable, the client can be signed up at the pharmacy. Add link to Pregnancy section in guidelines. |
| 12. | Are there any products unsuitable for pregnant clients ? | Varenicline & liquorice gum. NRT patches are only licensed for 16 hours in pregnancy, so clients should be advised to remove their patches at bedtime. |
| 13. | Why do some referrals from maternity services suggest NiQuitin patches? | There is some evidence that nicotine is metabolised more quickly in pregnancy. Maternity services may recommend NiQuitin 21mg patches for pregnant women smoking 15-20 cigarettes a day as NiQuitin 21mg is licensed for smokers who smoke 15-20 cigarettes. Nicotinell 14mg patches are licensed for those smoking 15-20 cigarettes a day. |

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| 14. | What do we do if the client refuses to give consent to follow up or to give a telephone number? | <p>They cannot be offered the service unless they consent to follow up. Follow up can be by letter if no phone number is available. A telephone number must be entered on PCR. If unable to give a number for themselves, a client can give another contact number on their behalf.</p> <p>Under no circumstances enter the pharmacy telephone number in a client's record, to avoid data upload failure and consequent payment failure.</p> |
| 15. | Do we put clients started in Acute (hospital) on PCR? | No, this is the only type of referral that is not entered on PCR. Acute clients will present with a card (or it will be emailed securely to the pharmacy) which should remain in the pharmacy until the quit attempt is completed. Once finished, please note your contractor code on the front of the card and send the completed card by recorded delivery (to protect patient confidentiality) back to the QYW pharmacy team (address on the card). Cards may also be scanned and emailed back if from a secure NHS email. This will allow for payment to the pharmacy. |
| 16. | If a client is housebound can they still join the service? | <p>Yes, as long as the pharmacy can get the required paperwork completes and is happy to either deliver the pharmacotherapy or it can be picked up by another person. Please ensure the pharmacy calls the client each week to give motivational support.</p> <p>There is an option on PCR to record 'no CO reading' as it may not be possible to measure one for a housebound client. The pharmacy will still receive a payment if no CO reading is recorded for housebound clients.</p> |
| 17. | Can NRT or varenicline be supplied to clients living in a residential or care home? | <p>Yes, to support a quit attempt.</p> <p>However, NRT or varenicline cannot be supplied for more than 12 weeks.</p> <p>If NRT is required to stop withdrawal symptoms in clients unable to smoke in a care setting this would need to be prescribed by a GP or purchased.</p> |
| 18. | If client is allergic to the Nicotinell patch what should you do? | <p>Consider an alternative product in the Nicotinell product range.</p> <p>If unsuitable, call the Pharmacy Health Improvement team on 0141 201 4945.</p> |

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| 19. | Why do we have to use Nicotinell ? | Nationally NRT suppliers were invited to tender prices for their products. Nicotinell is currently the most cost effective range of NRT products for NHS GGC. |
| 20. | Cannabis question | Most cannabis smokers also smoke cigarettes or roll ups and attempting tobacco withdrawal with NRT may help a client manage the tobacco part of the cannabis mix. However, NRT will have little effect on minimising cannabis withdrawals. So it is important to assess if a client is willing to stop smoking cannabis in addition to tobacco. Bearing in mind it may be better to tackle one addiction at a time. Best advice is to reduce cannabis use slowly prior to a planned quit date and have coping strategies/support in place for managing withdrawals. FRANK and Marijuana Anonymous - www.marijuana-anonymous.co.uk . are useful websites Local alcohol and drugs teams may also be a suitable route for support. |
| 21. | Can a client change from varenicline during a quit attempt to NRT? | Yes Close the varenicline quit attempt and commence an NRT quit attempt (as per new quit attempt Q2). |
| 22. | Can NRT be given to children under 16 ? | Yes, NRT can be given to a young person from the age of 12. If the young person is not accessing the Quit Your Way Youth Service 0800848484, the pharmacist should if possible: 1. Involve the parent/carer in the quit attempt 2. Gain consent of a parent or legal guardian if the client is less than 13 years of age. 3. Follow the advice of the Caldicott Guardian on establishing and recording consent for patients without capacity. |
| 23. | If someone wishes to use Zyban (Bupropion) , what should you do? | <ul style="list-style-type: none"> • Refer client to GP for prescription. • Follow guidelines • This can be supported on PCR |
| 24. | Can GP prescribe VOKÉ electronic cigarette as this is a non-formulary product? | Non-formulary products should not normally be prescribed. GPs can however prescribe non-formulary products if they really want to. Any non-formulary prescribing is highlighted to their practice. This product is £12 a pack and clients can use up to 2 packs a day. This would amount to £168 a week. |

| Varenicline | | |
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| | Question | Answer |
| 1. | Does a client have to have a previous NRT quit attempt before trying varenicline | No, varenicline can be used first line. The client should be assessed for motivation to quit and also suitability to use varenicline using the Varenicline Risk Assessment Form. |
| 2. | I am worried about prescribing varenicline due to previous reports of suicidal ideation. Where would I find updated safety information about varenicline? | In the EAGLES study. Advice could be sought from the client's GP re: suitability for varenicline and previous mental health history. |
| 3. | Can a client be given a 2nd product when taking varenicline | No as varenicline acts by partially blocking nicotine receptors in the brain hence giving nicotine won't help. |
| 4. | How long between quit attempts should a client wait before trying varenicline again | There is no waiting time between quit attempts, it is at the discretion of Pharmacist/GP, as long as the client is motivated. |
| 5. | Can any member of staff undertake the Risk Assessment for varenicline? | No. A qualified pharmacist is the only person who can go through the Risk Assessment with the client and then sign it along with the client. |
| 6. | If a client prescribed varenicline by the pharmacist wishes to continue with varenicline after a 12 week course , what should they do? | The PGD does allow for varenicline to be continued for up to another 12 weeks after the initial 12 week course. This should not normally be required. After 12 weeks there are no pharmacy payments, just reimbursement for the product when a UCF is submitted |
| 7. | Can a client change from NRT to varenicline if they are still smoking? | Yes, if they are still considered sufficiently motivated to quit. If a client wants to change to varenicline mid quit (and the Varenicline Risk Assessment has been successfully completed), The first quit attempt should be shut down and a new one started (waiting until the following Friday to restart to avoid PCR upload failure) to ensure varenicline is given for the recommended 12 week course. |
| 8. | If a client has been started on a varenicline starter pack on GP prescription , can we continue the client on a QYW quit attempt for the rest of the course? | The client could be asked if they wanted to get their varenicline from the GP or from the pharmacy weekly with support. If they chose pharmacy supply and successfully complete the Varenicline Risk Assessment, start the quit attempt in the pharmacy with the starter pack. Advise the GP of this change |

| 9. | How long does the Varenicline Risk Assessment form need to be kept in the pharmacy? | It must be kept securely in the pharmacy for 3 years. |
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| 10. | If a client has been started on varenicline in hospital can the pharmacy provide product to continue the quit attempt | Yes, if the pharmacist completes the varenicline risk assessment with the client and is happy to prescribe varenicline, the attempt can be continued in the pharmacy (see Q5 Varenicline). The client should have a hospital QYW card which can be returned for payment. The client does not go on PCR, support will be provided by the Acute QYW team and recorded by them. |
| PCR | | |
| Question | Answer | |
| 1. | Who can get a password for PCR? | Pharmacists, all pharmacy locums and pharmacy technicians can have a login |
| 2. | How can a PCR password be requested? | Contact Michelle Cooper on 0141 232 1727 |
| 3. | When can a pre-registration pharmacist get a password for PCR | They can get a password when they are a registered pharmacist. |
| 4. | The search is returning no matches even if the CHI number is known or entered. | Click "create a new PCR record". Then enter Given Name, DOB, full Postcode and Gender. The CHI search button should then become active. |
| 5. | Trying to register a new client on QYW and when keying in the CHI number , which is correct, an error message appears "CHI number is not unique" | There is a record created on PCR using that CHI number already, so you need to search for the client using only the CHI number. When you find the record, check all the information is correct and it should then allow you to continue with the quit attempt recording. |
| 6. | When should you enter the quit date? | When the client returns on the second visit (week 1) to collect the product. |
| 7. | What do I do if the client CHI number is not available? | Look up CHI check in PCR CHI search. If still not available contact QYW office on 0141 201 4945 or GP. |
| 8. | What if the client does not have a CHI Number (not from Scotland)? | A CHI number is unique to patients in Scotland and are only created by GP Practices. In order to receive a CHI number, you must be registered with a GP Practice in Scotland. |
| 9. | How many days maximum can we enter for a client between referral & quit date? | Maximum 13 days. |
| 10. | What is the number for the e-pharmacy helpdesk? | 0131 275 6600 for existing login accounts. |
| 11. | If I miss submitting the 4 week follow up MDS , can I continue with the quit attempt? | If the 4 week MDS is not completed the pharmacy will receive no further MDS payments and the client's quit attempt will be classed as unsuccessful. |

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| 12. | What do we do if the client does not return before 4 week follow up? | If the client stops coming before the 4 week follow up, please leave the record open and contact client when client is due 4 week MDS data submission. If they are smoking, mark the quit as 'unsuccessful', submit the data then close the quit down. If they have managed to remain smoke free, update the PCR accordingly & leave open. Follow them up at 12 weeks, submit 12 week MDS data, recording the smoking status, then complete the 'Assessment completion'. |
| 13. | Is it OK for the pharmacy to have entered their own telephone number instead of the client's telephone number? | No, although the quit attempt will look as though it has been recorded correctly on PCR, behind the scenes the quit attempt will not actually be recorded and will never upload onto ISD, as the PCR will recognise the pharmacy telephone number and disassociate it from any client. |
| 14. | If on entering client details, the message ' client already has another active referral at another pharmacy ' comes up, what can we do? | The client could (at the discretion of the pharmacist) restart a quit attempt at their previous pharmacy, within the 12 weeks of their previous failed quit attempt – but not at another pharmacy until after the 12 weeks has passed. Alternatively, call the Health Improvement team who can confirm when the client's previous quit attempt started at another pharmacy. This will allow the team to see when the quit will finish, and thus be eligible to restart a quit attempt at the new pharmacy. |
| 15. | If I make a mistake while entering information in the Initial Data Capture page, can I amend the information once I have saved it? | Yes, you can amend everything on this page except the quit date - go into the address box, go up to the Data Capture Link, then scroll to section you wish to amend. |