



Pan Lancashire Tackling Smoking In Pregnancy Project Group

Tackling Smoking in Pregnancy Action Plan 2014 - 2016

Abstract: This action plan refers to the Tobacco Free Lancashire Three year Tobacco Control Strategy for Lancashire 2014 - 2016¹ and the NICE guidance on smoking in pregnancy². A comprehensive Pan-Lancashire programme needs to be undertaken to systemise and embed organisational change to ensure all pregnant smokers are offered effective support in order to reduce the rates of smoking. This would include the following components:

Objective One: Standardised Opt Out Pathway across Lancashire

Definition – A ‘Care pathway’ is an agreed standardised approach to care of a pregnant woman which aims to reduce variability in practice and ensure a consistent approach by all those involved in her care. An ‘opt out referral system’ means that all women who smoke will automatically receive a referral to a stop smoking service unless she specifically states that she does not want one.

Activity/Action	Partners	Outcome/Outputs	Timescales – phased approach to completion
1. Standardisation of a clear smoking in pregnancy opt-out care pathway, including referral systems, raising the issue at every contact and protocols to reflect the evidence base and NICE guidance.	CCG's	Decrease in number of pregnant smokers opting out of referral process.	June – November 2014
2. Incorporation of stop smoking advice and CO monitoring at first maternity booking, CO monitoring at 20 weeks scan and CO monitoring at 36+ weeks gestation, supported by provision of CO monitors and CO screening information resources for pregnant women; ensuring every contact counts.	Stop Smoking Services Sonographers Maternity Services	Reduction in number of pregnant smokers not attending appointments at Stop Smoking Services. Implementation of electronic referral to Stop Smoking Services.	November 2014 – April 2015
3. Implementation of immediate and direct electronic referral system for frontline workers into local Stop Smoking Services.	Commissioners of Stop Smoking Services	Adoption of a standardised mandatory opt out pathway across Lancashire.	May 2015 – October 2015
4. Adoption of CO reading of 4ppm for opt out pathway to reflect the evidence of NICE smoking cessation secondary care	Maternity Services Stop Smoking	Increase number of pregnant smokers referred to Stop Smoking Service to 100%, unless they opt out.	June – November 2014

<p>guidance and Pregnancy Challenge Group recommendation^{2,3}.</p> <p>5. Identification of reasons for Did Not Attend (DNA's) attendance for support at Stop Smoking Services.</p> <p>6. Inclusion of niche tobacco smoking products e.g. shisha in smoking in pregnancy care pathway.</p>	<p>Services</p> <p>Maternity Services</p>		<p>June 2014 – October 2015</p> <p>June – November 2014</p>
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Objective Two: Training

Definition – This objective aims to ensure a consistent approach to training for all staff involved in the care of pregnant women.

Activity/Action	Partners	Outcome/Outputs	Timescales – phased approach to completion
<p>1. Consult and identify training requirements for midwives and maternity staff.</p> <p>2. Development and delivery of mandatory brief intervention and CO monitoring training, including annual updates, with associated resources, for all maternity staff (including allied health professionals, neonatal staff and sonographers) to ensure routine delivery of advice and CO screening for all pregnant women; ensuring every contact counts.</p>	<p>Maternity Services</p> <p>Stop Smoking Services (Lancashire) Public Health Team (Blackpool)</p> <p>Maternity Services</p>	<p>Development and implementation of a consistent training package for maternity and frontline staff working with pregnant smokers.</p> <p>Monitoring of the number of maternity and frontline staff trained in brief advice and brief intervention training, including CO monitoring training.</p> <p>Establish a baseline of the services that have received</p>	<p>November 2014 – April 2015</p> <p>November 2014 – October 2015</p>

<p>3. Delivery of Risk Perception training to Specialist Midwives and incorporation within the care pathway to reach out to pregnant smokers who do not engage with Stop Smoking Services.</p> <p>4. Deliver very brief advice training programme to allied frontline health and social care professionals e.g. children centre staff.</p> <p>5. Inclusion of e-cigarettes and niche tobacco smoking products in training materials to increase knowledge and understanding of the impact in pregnancy to maternity and frontline staff in brief advice and brief intervention training.</p>	<p>Children and Young People Directorate</p> <p>CCG's Commissioners of services</p>	<p>training sessions.</p> <p>Development and implementation of specialist training for specialist midwives.</p> <p>Increase in the number of trained staff who are able to provide brief advice/intervention and specialist advice to pregnant smokers resulting in a reduction in SATOD figures.</p> <p>Undertake an audit sample of the number of staff training and referring pregnant smokers into Stop Smoking Service.</p>	<p>November 2014 – April 2015</p> <p>November 2014 – October 2015</p> <p>November 2014 – April 2015</p>
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Objective Three: Information and Support			
Definition – This objective relates to the information and support provided to pregnant women, their partners, carers and families			
Activity/Action	Partners	Outcome/Outputs	Timescales – phased approach to completion
<p>1. Development and provision of tailored promotional materials and information, in partnership with pregnant women and new mothers, regarding the risks of smoking and health benefits for pregnant smokers,</p>	<p>Hospital Communication Department</p>	<p>Evaluation of increased awareness of risks of smoking in pregnancy, through the use of targeted campaigns.</p>	<p>November 2014 – April 2015</p>

<p>including social media.</p>			<p>June 2014 – April 2016</p>
<p>2. Provision of a 'Supporting a Smokefree Pregnancy Scheme' to increase quit rates among pregnant smokers up to three-months post-partum.</p>	<p>Local Authority Communication Department Tobacco Free Futures</p>	<p>Utilising new marketing strategies to increase referrals and continued attendance to Stop Smoking Services. Increased quit rates 3 months post-partum.</p>	<p>June 2014– November 2016</p>
<p>3. Provision of a Smokefree Homes and Cars scheme to reduce exposure to secondhand smoke and assist pregnant quitters and their families to remain smokefree.</p>	<p>Maden Centre Tobacco Free Futures</p>	<p>Increase the number of Smokefree Homes pledges.</p>	<p>May 2015 – October 2015</p>
<p>4. Development and implementation of new marketing strategies to promote Stop Smoking Services, with possible longer sessions treatment sessions and use of one-minute video uploads.</p>	<p>Public Health</p>	<p>Monitor of number of one-minute video uploads in place and number of times accessed.</p>	<p>May 2015 – October 2015 June – November 2014</p>
<p>5. Liaison and engagement with community leaders and forums, faith groups and childrens centres to raise awareness of Stop Smoking Services and smoking in pregnancy.</p>	<p>Community Faith Centres Public Health</p>	<p>Reduction in SATOD figures to 11% or less by 2015.</p>	<p>May 2015 – October 2015</p>
<p>6. Development of a smoking in pregnancy campaign to target under the 25 year age group.</p>	<p>Children's centres Jo McCullagh</p>	<p>Implementation and evaluation of smoking in pregnancy campaign for under 25 year age group.</p>	
<p>7. Increase in capacity through the breastfeeding peer mentors programme</p>	<p>Star Buddies (North & Blackpool) NCT in East</p>	<p>Monitoring of the number of</p>	

and/or children's centre staff to deliver stop smoking brief advice to pregnant women and new mothers.	Families and Baby (Central) Katie Wharton	breastfeeding peer supporters trained.	
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Objective Four: Performance Monitoring and Evaluation			
Definition – This objective relates to the way data on smoking in pregnancy will be collected, monitored and used to evaluate the effectiveness of this plan.			
Activity/Action	Partners	Outcome/Outputs	Timescales – phased approach to completion
1. Implementation of performance management systems to ensure effective evaluation of smoking in pregnancy care pathway.	Hospital - Information Governance	Implementation of monthly monitoring process, including CO validation at 36+ weeks data.	November 2014 – April 2015
2. Implementation of a Standard Operating Procedure and a monthly data validation to audit SATOD collection. This could be supported by the distribution of monthly performance stop smoking update to maternity services.	Hospital IT Departments	IT fit for purpose and inclusion of SATOD at 36+ weeks in addition to booking.	May 2015 – October 2015
3. Implementation of SATOD at 36+ weeks to establish a consistent measure.	CCG's	SATOD KPI in secondary care contracts.	June – November 2014
4. Implementation of SATOD as a KPI in secondary care contracts held with Clinical Commissioning Groups.	Maternity Services Public Health	Information governance process agreed and implemented.	November 2014 – April 2015

5. Review governance procedures to enable information data sharing processes and develop agreements about information sharing.		Reduction in SATOD figures to 11% or less by 2015.	June – November 2014
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1. A Three-Year Tobacco Control Strategy for Lancashire, 2014-2016 '*Making tobacco less desirable, acceptable and accessible in Lancashire*'. Tobacco Free Lancashire
2. National Institute for Health and Clinical Excellence (2010). Quitting smoking in pregnancy and following childbirth. Public Health Guidance 26. London: NICE.
3. National Institute for Health and Clinical Excellence (2013) *Smoking Cessation in secondary care: acute, maternity and mental health services*. Public Health Guidance 48. London: NICE <http://www.nice.org.uk/PH48>
4. Action on Smoking and Health (2013) *Smoking Cessation in Pregnancy - A call to action*. <http://www.ash.org.uk/pregnancy2013>

[Possible further developments – explore research proposals – E cigarettes in partnership with local universities](#)

Glossary

CCG	Clinical Commissioning Group
CO Validation	Verifying whether someone is smoking using a Carbon Monoxide monitor
DNA	Did not attend
KPI	Key Performance Indicator
NICE	National Institute For Health and Care Excellence
SATOD	Smoking status at time of delivery
IT	Information Technology
NCT	National Childbirth Trust
4ppm	A reading less than 4ppm (parts per million) is normally that of a non-smoker
Antenatal	Pre-birth; during pregnancy
Breastfeeding peer mentors	Friendly help, information and support about breastfeeding.
Brief advice	A short informal intervention delivered opportunistically giving information on the importance of behaviour change.
Brief Intervention	A structured method to deliver advice and constitute a step beyond brief advice as it involves the provision of more formal help, such as arranging follow-up support. Brief interventions aim to equip people with tools to change attitudes and handle underlying problems.
E-cigarettes	Battery-operated device that mimic cigarettes, contain nicotine, sometimes has flavors added.
Neonatal	Neonatal units in hospitals specialise in the care of babies born early, with low weight or who have a medical condition that requires specialised treatment.
Shisha	Smoking tobacco, sometimes mixed with fruit or molasses sugar, through a bowl and hose or tube
Smokefree Homes and cars	Campaign to raise awareness of the dangers of second hand smoke for babies and children, and to encourage their parents and carers to protect their children by making their homes and cars smoke free.
Sonographer	Specialist who uses specialised equipment to create images of structures and evaluation of the developing foetus and the female reproductive system during pregnancy.
Star Buddies	Breastfeeding support for Blackpool mothers.
Supporting a Smokefree Pregnancy Scheme	Incentive scheme to increase quit rates with pregnant smokers, up to 3 months post-partum.
Post-partum	Period of time following childbirth; after delivery.
Risk Perception training	An opportunity for specialist midwife to explore new ways to reach out to those women not engaged with the service - including implementation of a risk perception tool with women who decline support at booking