

Metro South (MS) Health Initiative of implementing QH Smoking Cessation Clinical Pathway

Frequently Asked Questions

What is Queensland Health (QH) Smoking Cessation Clinical pathway?

QH Smoking Cessation Clinical Pathway¹ is a state-wide smoke-free initiative which utilises the evidence based 5A's (ASK-ASSESS-ADVISE-ASSIST-ARRANGE) to address smoking cessation for all admitted inpatient smokers. The pathway utilises *Bittoun algorithm*² which is endorsed by the QH State-wide Respiratory Clinical Network, to provide treatment for nicotine dependence using Nicotine Replacement Therapy (NRT) and encourages referral to Quitline or/and GP for ongoing support after hospital discharge.

What Information is Hospital and Health Service (HHS) providing to patients?

Patients who are admitted to a QH Hospital and are active smokers are receiving tailored education and treatment options to address tobacco consumption during their hospital stay. Using the QH Smoking cessation clinical pathway, patients are interviewed by any of the multidisciplinary team members (i.e. doctor, nurse, pharmacist or allied health professionals) about their smoking status and assessed for nicotine dependence. All patients who are identified as current smokers are advised to quit and are provided with a brief intervention that addresses the risks of tobacco smoking and the benefits to quitting. Smokers are encouraged to use NRT during their hospital stay to achieve abstinence and to prevent cravings and withdrawals.

What will be in the HHS clinical handover to the GP in discharge summary?

Currently, inclusion of smoking cessation initiatives in the patient's discharge summary is up to the discretion of the treating medical team. Patients prescribed NRT on discharge and reviewed by a clinical pharmacist may receive a discharge medication record, which translates into the discharge summary.

What is expected of the patient and the GP to optimise outcomes?

It is expected of patients to continue to see their GP for ongoing support following hospital discharge or outpatient visit. The '*Continuing NRT at Home*' brochure has been developed by MS Health Service as a support tool for patients and GPs. This patient brochure includes an algorithm based on the *Bittoun algorithm*², which details methods for GPs to continue NRT for the patients post discharge or out-patient visit from a MS facility. It is expected that GPs will provide ongoing support to patients who wish to quit smoking, which is in accordance with the most recent RACGP guidelines³ as well as expert advice for smoking cessation.

Is NRT available to patients on hospital discharge? What is the best practice model for GPs in this setting?

NRT is readily available on the List of Approved Medicines (LAM) for management of nicotine withdrawal in hospitals and is used as a first line therapy for all eligible patients. Patients are also advised to continue NRT following hospital discharge where possible. Depending on the hospital policy, patients are either prescribed a PBS (www.pbs.gov.au) script for NRT or advised to see their GP for ongoing prescription of NRT post discharge. Those who refuse NRT, or are poorly responsive are advised to see GP for alternative therapies as per RACGP guidelines (<http://www.racgp.org.au>)³

Why is Varenicline (Champix®) not used in the MS hospitals when evidence shows that it is more effective?

Varenicline is currently not available on QH LAM for use in in-patient settings. Considering the average length of hospital stay, commencement of varenicline in hospital may also be less suitable due to the complexity of the dosing regimen and requirement for associated side-effects monitoring. As such, this may be a more appropriate therapy when strict follow up with community providers can be arranged.

Is Smoking Cessation Clinical Pathway available in GP – software compatible format for use in primary care?

This pathway is currently not available in GP-software. The QH SCCP is a Queensland Health document developed for use within the hospital setting. However, it can be utilised for providing brief intervention in any setting. The evidence supporting this document and the format of the questions asked in the pathway is in keeping with the recommendations from the RACGP smoking cessation guidelines which are worthwhile to use in GP setting.



Finding more information on SpotOnHealth *Professional*

SpotOnHealth *Professional* is an online space to help GPs and health professionals to navigate the maze of assessment, management and referral options for their patients.

Containing a wealth of information including localised evidence-based care pathways, patient and clinical resources, professional development opportunities and more, SpotOnHealth *Professional* enables coordination and integration for patients where they need it, when they need it.

More information about the Smoking Cessation and Nicotine Replacement Therapy will be available at www.spotonhealth.org.au/professional shortly.

If you have further queries, or feedback in relation to this MS smoking cessation initiative, please email deepali.gupta@health.qld.gov.au or spotonhealth@health.qld.gov.au

References:

1. Queensland Health Smoking Cessation Clinical Pathway <https://www.health.qld.gov.au/caru/pathways/docs/smoking-pathway.pdf>
2. Bittoun R. A Combination Nicotine Replacement Therapy (NRT) Algorithm for Hard-to-Treat Smokers. JSC. 2006;1(1): 3-6.
3. Supporting smoking cessation: a guide for health professionals. Melbourne: The Royal Australian College of General Practitioners, 2011(updated July 2014). www.racgp.org.au/your-practice/guidelines/smoking-cessation/