

PHE Smoking in Pregnancy Mapping Project Lancashire

<p>Project Title: 'Reducing Smoking in Pregnancy' - A Comprehensive Plan for Lancashire County</p>
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<p>Target Population: <i>(e.g. nationality, age bracket, socioeconomic status, geographic area, fathers etc. Please also discuss any local insight research which was used or commissioned)</i></p> <p>All pregnant women receiving care or registered through their GP within Lancashire County (not including Blackburn with Darwen and Blackpool Unitary Authority's). There is also a sub-target cohort of all pregnant young women under 25yrs and their partners.</p>
<p>Locality: <i>(include all known details about where the project is located- hospital/local authority/community centre/Sure Start/neighbourhood/town/region)</i></p> <p>The whole of Lancashire County which includes, 6CCGs, 12 Districts and 5 Maternity Trusts.</p>
<p>Aims and Objectives of the Project: <i>(SMARTT targets, KPIs, those set by commissioners and providers, please include informal aims as well)</i></p> <ul style="list-style-type: none"> • Three-fold increase of referrals to the Local Stop Smoking Services refer all to LSSS over the time span of the plan (2yrs 2014-2016) • Drop in SATOD at district level (no actual targets set) • Aspire to a 2% drop in SATOD in Lancs County Council by end of the programme (March 2016) • Significant increase in quits achieved through an Incentive Scheme (no target given)
<p>Brief Description of the Project and how it operates: <i>(please include background to how the project was initiated, obstacles faced during setup and throughout and how/if they were overcome, training arrangements for staff)</i></p> <p>The tobacco control alliance had chosen smoking in pregnancy as the first priority area for which an action plan would be developed as part of delivering the overarching strategy. Rates of smoking at time of delivery (SATOD) remained high across the 3 local authority areas of Lancashire (BwD15.2%,</p>

BBC 28.2%, LCC 16.9%) and a shared partnership approach across the county was deemed the most appropriate way to ensure consistency and build upon excellent work previously carried out in local areas across the county to reduce smoking in pregnancy.

Initially a one-day conference and planning day was held and representatives from around 50 organisations including; primary and secondary care providers, midwives, children and family centre and staff health and social care commissioners. Guest speakers gave presentations highlighting the local and national picture in smoking in pregnancy as well as examples of existing good practice and recent developments in policy.

An afternoon planning session was held with participants identifying priority areas for local action under the following headings:

- Objective One: Standardised Opt Out Pathway across Lancashire
- Objective Two: Training
- Objective Three: Information and Support
- Objective Four: Performance Monitoring and Evaluation

These were developed into a pan-Lancashire action plan. An expert reference group was asked to oversee the implementation of this plan on behalf of Tobacco Free Lancashire.

Details of time scales to development and implementation of programme:

- a big event with stake holders leading to pan-Lancashire action plan;
- established task and finish plan headed up by the Tobacco Free Lancashire alliance;
- sign off by Lancashire County Council Health and Wellbeing Board and production of annual report to the board.

The action plan was signed off in July 2014, detailing four main areas of activity:

1. Development and implementation of countywide consistent opt out pathway.
2. Training.
3. Development, production and delivery of information for pregnant women.
4. Development and implementation of data quality and audit protocols.

1. Development and implementation of countywide opt out pathway:

- Initial development of pathway followed by consultation of pathway with pregnant women to ensure it was workable
- All CCGs to sign off and endorse implementation (currently only signed off by 5 CCGs)
- Meeting with all heads of midwifery to agree pathway and endorse its implementation (only 3 Trusts currently operate the pathway)
- Commissioned Tobacco Free Futures to implement and monitor countywide incentive scheme

2. Training

- Purchase monitors and consumables for all community midwives
- Trained all community midwives to carry out CO screening, brief intervention and referral (currently paper referral which takes a minimum of 48 hours)

<ul style="list-style-type: none"> • Developed and implemented training toolkit which includes online training • Trained maternity assistants to use Risk Perception at dating scan to pick up women who DNA/LTF from initial CO screening and referral at booking appointment • Trained all health visitors to carry out brief intervention and referral at their 26 week ante natal appointment • Trained breastfeeding mentors to deliver brief intervention and support smoke free home scheme (this included a contract variation in order to achieve) <p>3. Development, production and delivery of information for pregnant women</p> <ul style="list-style-type: none"> • Developed CO screening leaflet for all pregnant women, available at booking appointment. This leaflet was developed through local insights and co designed and branded 'Quit for you quit for two'. It is available in paper form and electronic to all staff who work with pregnant women across the county. • www.quitfortwo.co.uk developed through insights, is an interactive website under the same brand as 'Quit for you quit for two'. Information is given to the pregnant woman at booking via a card given at booking if she is referred to the LSSS. The site gives lots of information including what she can expect from the LSSS, money calculator, risks of smoking. Includes local videos and quizzes. • Development and implementation of mobile patient information app 'Quit for us', dedicated to pregnant women Launched in July 2015 and available for both android and Apple. Does not require internet access once down loaded. It contains games, tips, pregnancy calendar, how to access their LSSS and information on quitting and smoke free homes. Co-produced via insights work. Illustrates care pathway for information and calling cards.
<p>Outcomes: (provide baseline, please also include formal and informal outcomes - e.g. a drop in the number of pregnant smokers, changing attitudes amongst clinical staff,)</p> <p>Taking a pan-Lancashire approach to action planning has led to a robust partnership, an evidence-based action plan with a high degree of buy-in from a wide range of stakeholders.</p> <ul style="list-style-type: none"> • "Opt out" not fully implemented so no data as yet but expecting to see threefold increase in referrals • Incentive scheme has achieved an increase of 9% compared with the local four week quit rate. • www.quitfortwo.co.uk had sessions engagement of 1,631, with 2,875 page views and 1,396 individual users (data from 19th March 15 – 11th May).
<p>Relationship to current evidence base: (in particular which evidence was drawn on during the project design?)</p> <p>NICE PH 48 Smoking cessation in Pregnancy – A call to action. SiP Challenge group – ASH Report 2013</p>
<p>Evaluation: (formal and informal, was it published, if an evaluation has not been carried out please explain why not - funding?)</p>

- Looking at increase in referral, footfall, Did Not Attend (DNA), lost to follow-up (currently 20% with intention to drop) and 4 week quits for LSSS and SATOD from the trusts.
- Hits to the Quit for two web site
- Monitoring app and where they live by region, age gestation and number of cigarettes smoked per week
- Incentive scheme
- Training is currently being evaluated.
- Action Plan is monitored quarterly by the tobacco alliance and the tobacco control lead.
- Annual report to the Lancashire Health and Wellbeing board

Costs:

(revenue and capital, include detail about equipment costs - CO monitors etc)

Total investment in the programme is £305,000 from Public Health Lancashire County Council. It was been granted funding for 2 years running 2014 to 2016.

Commissioning arrangements and timescale

(is there long term sustainability or was this a short project, please also say who has commissioning responsibility for the project)

This project was led by the Public Health Department in Lancashire County Council and both funded and commissioned by them with the support of the local Clinical Commissioning Groups. CQUINs have been implemented to incentivise CCG engagement and the local authority has used statutory obligations for CCGs and NHS England to drive the project forward.

Local maternity services are currently challenging NHS England to increase the maternity tariff for smokers to enable appropriate resources to be made available to services to support pregnant women who are identified as smoking.

Any other points the interviewee wishes to make:

(any learning, advice for colleagues setting up a similar project)

Engagement amongst staff and other stakeholders is the principle challenge. One trust took twelve months to come on board. Lancs CCG offered a care bundle as a CQUIN which was then used as leverage to engage with the other CCGs.

Information governance across all trusts and LSSS is possible as all services are currently offered through the NHS. There is concern how this would be achieved if services were procured from third sector providers.