

PHE Smoking in Pregnancy Mapping Project Telford and Wrekin

<p>Project Title: Correctly identifying pregnant smokers during maternity care</p>
<p>Project Lead: Vicki Pike</p>
<p>Project Lead Contact Details: <i>(email/phone/mobile/address/fax/service or project web address)</i></p> <p>Health Improvement Commissioner at NHS Telford and Wrekin Email: Vicki.pike@telford.gov.uk</p>
<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>Pregnant smokers living in the catchment area of Telford and Wrekin.</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>Telford and Wrekin</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> <p>In 2013/14 Telford and Wrekin came out 5th highest local authority for Smoking at Time of Delivery (SATOD) in the country with 22.4% SATOD. Jointly the CCG, The Local Authority (Public Health) and SaTH maternity unit decided to look at developing work to improve this position.</p> <p>An audit was conducted on the women recorded as SATOD against those that had been recorded as supported to stop smoking at delivery. Fifteen women had been incorrectly recorded as smoking. If this data had been correctly recorded, the yearly figures would have been reduced by nearly 1%, putting T&W under 22%. An aim was therefore set to improve data collection.</p>
<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>A working group was developed, with involvement from Public Health, Maternity and the local Stop Smoking in Pregnancy (SSPS) service (NORTH 51). The working group developed and implemented the following:</p>

<ul style="list-style-type: none"> • Training for all midwives on stop smoking including: how to talk/approach smoking, how to use a CO monitors and what the readings means • CO reading taking at booking for all women • CO reading at the 28 week home visit for all smoking mothers-to-be • Stop smoking service presence in maternity during consultant lead clinics • Identifying cases of inaccurate recording of smoking status at delivery. Verification of smoking at time of delivery was conducted quarterly by comparing maternity records to the SSPS records. • 'Opt out' system for all smoking at booking- via an electronic referral system direct to the provider
<p>Outcomes: <i>(provide baseline, please also include formal and informal outcomes - e.g. a drop in the number of pregnant smokers, changing attitudes amongst clinical staff,)</i></p> <p>Recorded 98 four week quits for 2013-14, which is the highest result on record. These women are now delivering and the impact on the delivery figures is showing. September 2014 recorded a SATOD figure of 15%.</p>
<p>Relationship to current evidence base: <i>(in particular which evidence was drawn on during the project design?)</i></p>
<p>Evaluation: <i>(formal and informal, was it published, if an evaluation has not been carried out please explain why not - funding?)</i></p>
<p>Costs: <i>(revenue and capital, include detail about equipment costs - CO monitors etc)</i></p>
<p>Commissioning arrangements and timescale <i>(is there long term sustainability or was this a short project, please also say who has commissioning responsibility for the project)</i></p>
<p>Any other points the interviewee wishes to make: <i>(any learning, advice for colleagues setting up a similar project)</i></p>