Introduction

This Local Enhanced Service (LES) specification details the agreement between Provider (Community Pharmacies) and Commissioner (NHS England) for the provision of ‘stop smoking’ interventions to be carried out during this financial year, 1st April 2013 to 31st March 2014 (according to quit date) inclusive, within the Community Pharmacy setting and for which remuneration will be claimed by the Provider from the Commissioner.

This local enhanced service is available to all Community Pharmacies who fulfil the service specification by NHS England, and who have expressed an interest to provide this service and have been accepted by NHS England as a service provider.

Parties to the agreement

The ‘Provider’ is the community pharmacy providing the service to patients.

The ‘Commissioner’ is NHS England.

Termination of agreement

Any provider currently providing the ‘stop smoking’ service that does not wish to sign up to this enhanced service, and therefore does not wish to be remunerated for its ‘stop smoking’ services, should put this in writing to the Gloucestershire NHS Stop Smoking Service (GSSS). The provider wishing to terminate this Agreement is asked to give Gloucestershire NHS Stop Smoking Service (GSSS) three months written notice.

The commissioner may terminate this agreement by giving three months written notice to the provider.

This enhanced service covers stop smoking services given by the provider for one year only during the financial year of 1st April 2013 to 31st March 2014 inclusive. Any patient whose quit date occurs within this time period is covered by this enhanced service (i.e. some follow ups may occur into 2014/15).

Aims

The overall aim of this enhanced service is to support the reduction of smoking prevalence in Gloucestershire and to reduce health inequalities, enabling clients to access high quality stop smoking support which best fits their needs.
The enhanced service also aims to:

- enhance the quality and effectiveness of ‘stop smoking’ services provided in Community Pharmacies by ensuring a **whole practice approach** and ensure that a high quality standard of training has been received by those providing the intervention to smokers

- provide high quality, comprehensive, accessible, convenient and cost-effective stop smoking services across Gloucestershire

- ensure that robust data is submitted to Gloucestershire Stop Smoking Service (GSSS) to enable accurate and timely measurement of outcomes, to assess effectiveness and cost effectiveness of the stop smoking intervention

- ensure that a large number and variety of healthcare professionals can contribute to the reduction in morbidity and mortality as a result of smoking

- support the achievement of 4-week quitter targets

- Ensure more intensive support is offered to support smokers with more complex needs by referral to Gloucestershire NHS Stop Smoking Service Specialist Service (GSSS).

**Service outline**

**The Provider is expected to undertake the following:**

- Ensure a ‘whole pharmacy approach’ for provision of stop smoking services within the Community Pharmacy is followed at all times. (Appendix 1).

- Follow the Tobacco Cessation Care Pathway for Community Pharmacies in Appendix 2.

- To deliver a minimum of 20 4-week quitters per annum (or 1-2 per month). This is to ensure that services are effective and appropriate, and that advisers can maintain their professional competence. Annual activity levels will be reviewed at both 6 months and at the end of each financial year. This will form the basis of the annual review of services to be commissioned the following year.

- Supply NRT using the following two methods:
  - Pharmacist led supply of Nicotine Replacement Therapy (NRT) using a Patient Group Direction (PGD) for all patients including pregnant women
  - Voucher Scheme for Nicotine Replacement (excluding pregnancy)

- Use the appropriate process to provide the patient with Nicotine Replacement Therapy, except where Champix or Zyban are considered the most appropriate option when the patient will be referred to the GP to obtain a prescription, but may continue to be supported within the Community Pharmacy service (letter template is available in appendix 7 and 8).
• Provide one or more ‘in-house’ Stop Smoking Adviser(s) for service continuity.

• It is a requirement that one of these advisers is an accredited pharmacist.

• The accredited pharmacist adviser will have successfully completed either the CPPE smoking cessation course (part 1/ part 2) or the NCSCT stage 1 online training programme.

• Accredited pharmacists who want to provide NRT to pregnant women can do this under the Patient Group Direction (attached).

• CPPE and/or NCSCT certificates must be forwarded to NHSG prior to starting the service.

• The pharmacist will be required to sign to confirm that they have read and understood the PGD for NRT and this SLA including appendices, in order to provide support to the ‘in-house’ adviser/s, and provide NRT under a Patient Group Direction (PGD) where appropriate to pregnant women.

• All non-pharmacist Stop Smoking Advisers (and non accredited pharmacists) must be trained by attending the two day training provided by the GSSS and successfully complete the level 1 NCSCT assessment to become a registered adviser with the NHS Stop Smoking Service in Gloucestershire.

• All advisers are required to carry out ‘one to one’ smoking interventions with patients according to the NHS Stop Smoking Services - Service and Monitoring Guidance – October 2011/12.

• Ensure that all members of the Community Pharmacy team receive advice on Brief Interventions and encourage them to actively interact with patients who smoke to ensure robust referrals for those wishing to stop smoking.

• Advertise the availability of Stop Smoking Services within the Community Pharmacy, using leaflets, posters and other advertising materials which can be obtained from the Gloucestershire NHS Stop Smoking Services.

• Provide a confidential consultation area to allow for privacy during a consultation period.

• Follow the recommended course of treatment in line with NICE guidelines as described in the training for the Stop Smoking Advisers. This support will continue where appropriate for up to 12 weeks. In individual cases this may be extended to 36 weeks. As well as the cost per quitter the Community Pharmacy will receive the cost of the NRT product at C&D cost price, plus £2 supply fee.

• Ensure that monitoring forms are completed accurately and returned in a timely manner, following the ‘guidelines for completion’ in Appendix 3. Monitoring forms can be returned electronically via the ‘quit manager’ record system or via the paper monitoring form. Paper monitoring forms should be returned to GSSS, Edward Jenner Court, Unit 1010, Pioneer Avenue, Gloucester Business Park, Brockworth, Gloucester, Gloucestershire GL3 4AW as soon as the 4 week follow up is completed.
Late submission (more than one month since completion) of monitoring forms may result in loss of payment.

- Record all patients smoking status in the patients’ PMR (Patient Medication record) within the Community Pharmacy, with date when ascertained.

- The Adviser will refer any smoker whom they feel would benefit from more intensive specialist support than can be offered in the Community Pharmacy to the Gloucestershire NHS Stop Smoking Services. This may include pregnant women, adolescents, smokers with mental health problems or learning difficulties and people who are heavily addicted to nicotine.

- Unsuccessful quitters may be seen again provided this follows the guidelines from the NHS Stop Smoking Services Service and Monitoring Guidance – October 2010/11

- Community Pharmacy contractor providers of this service will comply with the General Pharmaceutical Council standards of conduct, ethics and performance at all times.

**The Commissioner will be responsible for:**

- Provide training for the identified Community Pharmacy staff on giving **Brief Advice in line with the ‘whole pharmacy approach’**.

- Provide training for person(s) identified within the Community Pharmacy as the Stop Smoking Advisers. Trained Advisers are expected to attend a minimum of one update session per year which will be provided by GSAS.

- Issue each Community Pharmacy with a CO Smokerlyser for use by the Stop Smoking Advisers free of charge. The monitor will be issued on submission of 5 monitoring forms from each pharmacy. This monitor will remain the property of GSSS and should be returned if the Stop Smoking Service ceases to function within the Community Pharmacy. The pharmacy will be responsible for any additional consumables eg flat pak mouthpieces and one way valves required to operate the smokelyser.

- Making payments on a monthly basis, based on the number of monitoring forms received in that month. Payment will not be made to 3rd parties providing the Stop Smoking Service for the Pharmacy

- Working with Community Pharmacies to initiate a ‘whole pharmacy approach’ and provide support to sustain this approach. Offer continued support and advice to the Stop Smoking Advisers within the Community Pharmacy. It is expected that all providers will have a quit rate above 40%. Any provider failing to comply with this quit rate will be offered further help and support.

- Contact patients using the data received from the Stop Smoking service in the Community Pharmacy, 6 months and one year after their quit date to provide long-term monitoring data as required by Department of Health.
£5.00 will be paid for each smoker setting a quit date (reported via completed and returned monitoring form).

£45.00 will be paid for each successful four week quitter (reported via completed and returned monitoring form)

The following bonus payments will be made for successful four week quitters falling into one of the following categories (the bonus payments are not cumulative). The higher payment will apply.

- £20.00 will be paid for each successful four week quitter who is pregnant.
- Or £10.00 will be paid for each successful quitter who lives in a super output area of significant deprivation.
- Or £10.00 will be paid for each successful quitter who has severe and enduring mental health problems.

A further bonus payment of £10 per 4 week quitter will be made to each pharmacy reaching 20 or more successful quitters on a per annum basis from April 1\textsuperscript{st} 2013 to 31\textsuperscript{st} March 2014.

The C&D cost price of NRT will be reimbursed plus £2 for each supply. Please see appendix 6 for claim form.

No payment is offered for training pharmacy staff whether initial, level 2 or update.

The monitoring form completed and submitted to NHS Gloucestershire must be:

- accurately completed
- CO (Carbon monoxide) verified
- received within specified timescales, i.e. monthly. Late submissions may result in loss of payment.
- shows that the Community Pharmacy has offered an initial assessment plus follow up consultations on a weekly basis for up to 4 weeks after the quit date. At least 3 attempts to follow up should be made, 2 by telephone and 1 by letter (or in person).
Appendix 1

A Whole Practice Approach

The aim of a sustainable delivery system is to empower the whole team to offer smokers the optimal treatment for the best chance of quitting, ie the ‘Gold Standard’.

In providing stop smoking support, ten components have been identified as essential. Each component is a vital link in the chain for supporting and delivering interventions that offer individuals the best chance of quitting.

1. Senior level commitment

   **Programme champion**
   Improvement in a system is highly dependent on commitment from senior management (**Pharmacist owner/Pharmacist in charge**). To ensure commitment, a highly respected member of the team needs to volunteer to be ‘programme champion’ (**member of the pharmacy team /trained Stop Smoking Adviser**).

   **Programme coordinator**
   A member of the team should personally volunteer to be programme coordinator, assuming responsibility for ensuring that everyone does their tasks and support is delivered consistently and effectively. The coordinator needs to keep the programme champion up to date on a regular basis so that any barriers encountered can be quickly tackled.

   The person should have sufficient credibility to maintain enthusiasm, overcome obstacles and gain the support of staff at all levels. He or she should feel deeply committed to helping smokers and not volunteer because of external pressure (**member of the pharmacy team /trained Stop Smoking Adviser**).

2. Incentives

   In order for stop smoking interventions to be delivered consistently, strong incentives need to be felt by everyone in the team.

   An appreciation of the significant impact that a small investment of time has in stimulating a quit attempt.


   A written protocol is essential as it ensures that all team members are clear on who is doing what. It should be tailored to the needs of the team and their desire to improve patients’ health.

4. Teamwork

   The whole team needs to be involved in implementing the system for delivering stop smoking support. When stop smoking support is the responsibility of only one or two people in the team, sustainability will be compromised.
5. **Training**
Training needs to be tailored to meet the needs of the individual members of the team, giving them the confidence and skills in discussing smoking. Those Pharmacists at senior management level who intend to give brief advice or support to Non-Pharmacist Advisers must complete CPPE smoking cessation level 1 and 2 or the NCSCT stage 1 online training programme. Individuals who want to provide behavioural support as Stop Smoking Advisers will need to attend the two day NCSCT approved intensive training provided by GSAS. Certificates are required be sent to NHSG prior to starting the service.

6. **Environment**
The working environment should reinforce messages provided by the healthcare providers, for example, the entire site should be smokefree and all patients and public areas should display promotional materials about the stop smoking support available. A positive environment will give subliminal messages that:
- The organisation genuinely believe that stop smoking is a credible activity
- Their healthcare provider is likely to ask about their smoking status
- Friendly help and support is available
- It is okay to ask for help and support

7. **Resources**
Appropriate patient information needs to be conveniently available and managed. The team should know where leaflets are stored and which leaflets meet diverse needs, for example, pregnant smokers, young smokers, people with learning disabilities, ethnic minorities.

8. **Therapies**
The team should be aware of bonafide and bogus therapies so that they can provide information about stop smoking aids and help individuals make an informed choice where appropriate.

9. **Local NHS Stop Smoking Service**
Written information should be conveniently available about the NHS Stop Smoking Service. The team should be aware of the available options, nearest clinics and success rates of the service.

10. **Feedback**
It is vital that a system is in place so that the team gets regular feedback on patient satisfaction and success rates. Unless the team gets regular feedback on the impact of the system, it is less likely to sustain the activity.

Taken from: Smoking Cessation in Practice. Investing 30 seconds to save a life. Patricia Hodgson and Heather Thomson. Yorkshire and the Humber NHS. 2007
Appendix 2

Tobacco Cessation Care Pathway for Community Pharmacies

1. **Establish and check patient’s smoking/tobacco use status**
   - **Never Smoked**
     - Congratulate and stress benefit to oral health
   - **Yes**
     - Current Smoker
       - Advise all tobacco users to stop. Relate this to their health condition. Stress need to stop smoking. Highlight benefits of quitting.
     - Congratulate and stress benefit to oral health. Update PMR record (if appropriate).
   - Ex-Smoker
     - Congratulate and stress benefit to oral health.

2. **Assess interest and motivation to quit**
   - **Maybe**
     - Provide information on quitting and the NHS Stop Smoking Services.
   - **YES**
     - Stress value of receiving professional help with quitting. Emphasise treatment greatly increases chance of quitting. Ask if they wish to be referred to in-house or local Stop Smoking Adviser.
   - **NO**
     - Accept answer in non-judgemental manner. Acknowledge decision and advise you will ask again at future visits. Emphasise that you will always be available to discuss stopping smoking in the future.

3. **Arrange an appointment with in-house SS Adviser**
   - Or provide information on how to contact Gloucestershire Stop Smoking Services.

4. **At next recall visit, establish outcome of quit attempt**
   - **NO**
   - **YES**
     - Congratulate and affirm positive effect on giving up.

If patient is interested in quitting but does not wish to attend in-house or local Stop Smoking Service, offer brief advice.
Appendix 3

Guidelines for completion of Monitoring Forms (IRS)

To enter Monitoring (IRS) forms on our database we must have all essential information, as detailed in the NHS Stop Smoking Service – service and monitoring guidance 2010/11. Incomplete forms will be returned for amendment. Please ensure they are returned promptly so that they can be included in the monthly and quarterly reports.

Side 1: Ask your patient to complete all sections on side 1 or complete for them if needed:
- Client Details – do not worry if they do not know NHS ID number
- Occupation – if unsure of which category they come under, ask to write in what they do
- Ethnic Group
- Mental health box can be ticked if you believe the patient suffers from enduring mental health problems (e.g. on the GPs mental health register).
- How client heard about the service – identify if through the Community Pharmacy
- Agreed quit date, including date of last tobacco use needs to be filled in. The date of 4 week follow up should be completed before the monitoring form is submitted to the Stop smoking service.
- Client signature – essential for consent of treatment and follow-up, passing on outcome data to GP and for anonymous data to Department of Health. All patient data will be kept securely and in accordance with Caldicott guidelines.

Side 2: Adviser use
Each adviser will receive their known personalised monitoring form please retain one as “master” so can be photocopied.
Tick which product/s the patient has been recommended. Please tick all relevant boxes; if combination Nicotine Replacement therapies are used tick all that are relevant. This also applies if any product is unsuitable and the patient then tries another instead – fill this in retrospectively if the patient gets NRT, Zyban or Champix after the initial appointment.

A CO reading must be taken at each appointment.

4 week follow-up after quit date
Four week follow-up after the quit date must be between -3 or up to +14 days of the four-week follow up date (e.g. Quit date set as 1/04, 4-week follow-up date is 29/04, allowed range is 26/04 to 13/05).

Tick Yes box if patient has attended for appointment or you have spoken to them on the phone. Record date and if via appointment record CO reading.
Tick No if patient does not attend, and you have been unable to contact them. Record dates of phone calls and when letter was sent.

Treatment Outcome
Tick appropriate box. The outcome needs to be validated with an initial and a final CO reading. The stop smoking service will monitor the amount of validated forms received from pharmacies and need to reach at least an 85% validation rate (Service and monitoring Guidelines 2010/11).

Return completed monitoring form to the Gloucestershire NHS Stop Smoking Service as soon as the 4-week follow-up is complete. Labels will be provided with free business address.
You must attempt to contact the patient twice by telephone and once by letter before returning a monitoring form as lost to follow-up.

General guidelines

If a patient postpones their quit attempt (i.e. makes no attempt to stop smoking on their quit date), encourage the patient to return to you as soon as they are ready even if this is only one week after their original attempt. For monitoring purposes, only the latest quit date per patient should be returned.
Appendix 4

Guidelines for Voucher Scheme for Nicotine Replacement

- The Stop Smoking Adviser completes the top section and asks the client to complete their personal details.
- The Stop Smoking Adviser retains the top copy for their records and gives the other copies to the client to take to the pharmacy counter.
- Pharmacist checks the clients eligibility for free prescriptions and if client is not exempt, collects current prescription charge.
- Pharmacist checks for contra-indications to client being supplied with NRT and refers back to Adviser if necessary.
- Pharmacist checks date on the voucher to ensure it is in date (within 14 days).
- Client is supplied with the most appropriate NRT product in return for the voucher.
- Client signs for receipt of the product.
- Pharmacist sends copy to PCT for payment on a monthly basis.

Role of the Stop Smoking Adviser
- Fill in appropriate section with complete details and enter the date that the voucher was issued to the client.
- Complete number of voucher for this client i.e. first, second etc.
- Ask the client to fill in their personal details in full. Must be given in full for counter fraud purposes.
- Inform the client that the voucher is to be passed to the pharmacist (or within 14 days of issue) and they will need to take proof of identify or exemption with them to the pharmacist.
- Retain the top copy of the voucher for client records and give the bottom two to the client to take to the pharmacist.
- Ensure that a separate voucher is given for each week’s supply of NRT.

Role of the Pharmacist
- Ensure that the voucher has been presented within 14 days of issue.
- Ask the client to tick the box if necessary for entitlement of free prescriptions, check evidence of entitlement.
- Supply the NRT considered the most appropriate for the client.
- Refer client back to the Adviser if not included in the criteria/ concerns re contra-indications.
- Ask the client to sign the appropriate section confirming they have received their product. Retain the top copy for pharmacy records and send the bottom copy to NHS Shared Business Services for payment. Please use voucher supply claim form Appendix 5.
- The top copy will need to be stored in a safe place as it may be required for audit purposes.
Nicotine Replacement Therapy
Batch Invoice for NRT prescribed under the voucher scheme

Date:         Invoice No:

Name and Address of Pharmacy:

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<th>Voucher No.</th>
<th>Date Supplied</th>
<th>Net Cost (drug tariff)</th>
<th>VAT (5%)</th>
<th>Cost of Supply (£2 per voucher)</th>
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Please return completed form together with one copy of each voucher claimed, to:

Contractor Payments, NHS Shared Business Services, Peveril House, Ringwood Road, Ferndown, Dorset, BH22 9AU

Payment PPA Local Scheme 9
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Sub Total

Less prescription charges

Total

Please return completed, to:

NHS Gloucestershire Stop Smoking Service, Edward Jenner Court, Unit 1010, Pioneer Avenue, Gloucester Business Park, Brockworth, Gloucester, Gloucestershire GL3 4AW.

Payment PPA Local Scheme 9
Repeat request for Varenicline

Dear Dr

My Level 2 Stop Smoking Adviser is currently supporting your patient during their attempt to stop smoking; the client has reduced their daily use of cigarettes and has set a quit date as identified above.

The client is happy to continue Varenicline; therefore would it be possible for them to have a prescription for:

- Varenicline 2 weeks supply, maintenance pack of 1 mg BD please
- Varenicline 2 weeks supply, maintenance pack of 0.5 mg BD please
- Varenicline 2 week supply, Starter pack (to be taken in reverse) please

My Level 2 Stop Smoking Adviser will continue to provide support during this time. I will oversee this quit attempt and will keep you informed of their progress; should you wish to discuss any issues please do not hesitate to phone me.

Yours sincerely

Pharmacist
Pharmacy Address
Tel:
Dear Dr

Request for Varenicline

This client has received a consultation from one of my staff who is a Level 2 trained Stop Smoking Adviser trained by the Gloucestershire Smoking Stop Service. They have been trained in being able to support people in their quit attempt using Varenicline with myself as a Pharmacist overseeing the practice. The client has been made aware of all the options and medications available, outlining the benefits and possible side effects of each. The client would like to use Varenicline and would be grateful if you will issue a prescription for:

Varenicline Starter Pack (2 weeks supply)

The patient has been asked if they suffer from any of the following health issues that may contra-indicate the use of Champix and I have indicated their response:

Liver Failure  Yes / No  Kidney problems  Yes / No
Hypersensitivity to Champix  Yes / No  Under 18 years  Yes / No

There are, however, some cautions which we have also discussed:

Epilepsy  Yes / No
History of psychiatric illness (including suicidal ideation)  Yes / No

**Female clients: we have discussed the importance of not getting pregnant or breast feeding whilst taking this medication. I have asked the client to discuss this issue with you further if they have any concerns.**

I will be supporting your patient through their quit attempt and will inform you of their progress.

Yours sincerely

Pharmacist