**What the service will provide**

The service will be a community-based specialist service provided by advisors with knowledge of mental health conditions and trained to provide stop smoking support to this group. In recognition of the needs of people with SMI the service will provide tailored, intensive but flexible support to enable those with SMI to either quit smoking and /or reduce the amount of tobacco smoked, and will be provided in line with national standards and guidelines. The service provided will be expected to include the following:

* extended 12 week programme of intensive tailor made and flexible behavioural support
* Nicotine Replacement Therapy- a wide range of both long and short acting NRT
* Vapes – a range of vapes to be used as a quit support tool
* Offer opportunity for harm reduction (i.e. Switching to vaping) so that those who are not ready to stop using tobacco are able can cut down on number of cigarettes smoked or switch to vaping.
* Pre-quit support – preparing clients to quit in the first 1-2 sessions before setting the quit date (this does not apply to discharged patients referred from acute sector)
* Ongoing post-quit support for 3 months
* Allow those who relapse to re-join the programme providing they demonstrate their continued motivation to quit and they are proven to be cutting down, limiting to up to 3 quit attempts in 18 months

**Group Support**

We expect the service to also offer clients the opportunity for group support and where possible, peer support to motivate clients, contributing towards their quit/harm reduction journey, and to sustain their quit/harm reduction achievements.

**Eligibility**

All people with a diagnosed SMI will be eligible.

**Links to other services and referral pathways**

The service will be expected to have establish links with key services including with:

* GP practice
* mental health services
* substance misuse service
* Adult Social Care
* other community services such as community pharmacies, Social Prescribers and Local Area Co-ordinators

There should also be a referral pathway from the acute mental health services to ensure that discharged patients with SMI under the national Tobacco Dependency Treatment Programme, TDTP, who have started a quit programme as inpatients will continue to receive support to complete their programme in the community.

**Outcomes to be measured will include**

* number of people reducing the quantity of cigarettes smoked
* Number of people partially switching to vapes (smoking and vaping?)
* number of people completely switching to vapes
* number of people achieving a quit between 4 -12 weeks
* number of people remaining abstinent or contained reduction in harm for 6 months post quit

The outcomes should be measured using recommended approaches such as:

* Carbon monoxide test to confirm either a quit or reduction
* Fagerstrom Test for Nicotine Dependence to confirm harm reduction achieved – whether this score has reduced

The service provider(s) will also be required to meet the national standards in training, equipment and premises provision as set out by the National Institute for Health and Care Excellence, NICE guidance and will be sufficiently trained with expertise to take into account the interactions between medications and NRT.

The provider will be required to collect and manage client data through the Pharmoutcomes system. Havering Council hold the license for Pharmoutcomes and will provide access for the chosen service provider. The template for data collection on Pharmoutcomes for this service will be designed by Havering Council, allowing input from the provider. Any training required will be arranged by Havering Council.

The contract of the provider will need to meet all relevant GDPR guidelines.

This will be an innovative stop smoking service for people with SMI and we would like to hear from potential providers interested in delivering this service. We recognise that one provider may not be able to provide all the elements required for this service. We therefore encourage collaboration between providers especially where one provider is unable to provide all elements of the service, and where there is a clear benefit to future service users in a collaboration being developed. Havering Council may be able to offer assistance with brokering the collaboration.