

Publication Report



NHS Smoking Cessation Service Statistics (Scotland) 1st April 2014 to 31st March 2015

Publication date – 6th October 2015

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Introduction

Overview

Smoking remains a major cause of poor health in Scotland, making an important contribution to health inequalities. It is important to provide support to those who want to stop smoking, and NHS smoking cessation services help to provide that support.

The national smoking cessation monitoring analyses produced by ISD are used to provide evidence of the reach and success of NHS smoking cessation services in Scotland. They are also used to monitor the smoking cessation HEAT (Health Improvement, Efficiency, Access and Treatment) target for the NHS.

The related HEAT target for NHSScotland in 2014/15 was to achieve at least 12,005 successful 3 month quits through smoking cessation services in the most deprived areas of Scotland. For this purpose the 'most deprived areas' are defined as the 40% most deprived data zones (60% most deprived data zones for island NHS Boards) calculated from within-board non-population weighted quintiles of the 2012 Scottish Index of Multiple Deprivation (SIMD). For further information see [Appendix A1.1](#). The publication refers to the 'most deprived areas' throughout.

Information included in this report

The statistics in this report are based on 'quit attempts' made during the HEAT target over financial year 2014/15. Data is represented by NHS Board for the:

- total number of quit attempts made;
- total number of quit attempts made in the most deprived areas;
- total number of 'self-reported' quits and percentage quit rates at three months after the 'quit date';
- total number of 'self-reported' quits and percentage quit rates at three months after the 'quit date' in the most deprived areas.

For information on the definition of a three month quit and calculation of a three month percentage quit rate, see [Appendix A1.2](#).

Please note that:

- figures are based on total quit attempts, rather than total number of clients with a quit attempt, so could include repeat quit attempts for the same client;
- figures are based on the NHS Board of treatment; the NHS Board area of the client may differ from the area in which they receive cessation support (e.g. a client attending a service in one NHS Board but resident in another);

- the report does not include referrals or initial contacts where the client did not go on to set a quit date or access 'relapse prevention' support;

Data Sources

The primary source of the data in this report is the National Smoking Cessation Database. Additional information is sourced from local NHS Board information systems (Greater Glasgow & Clyde NHS Board). Further detail on the national smoking cessation services monitoring and national database are available at [Appendix A1.3](#).

The data presented in this report are as extracted on 19th August 2015.

There is evidence, across Scotland, of data under-recording/late submission in relation to pharmacy cessation services. An electronic solution was developed to support community pharmacies in managing and reporting patient quit attempts as part of this service. Further details are provided in [Appendix A1.4](#).

Previous HEAT Performance Reports

Details and links to earlier HEAT target performance reports for financial years 2008/09 to 2010/11, and 2011/12 to 2013/14 can be viewed in [Appendix A1.5](#).

2015/16 Local Delivery Plan (LDP) standard

In April 2015, an LDP smoking cessation standard was introduced (previously HEAT 6 target). This also focuses on targeting people in deprived areas where smoking prevalence is highest. The target is to achieve at least 7,279 successful quits, at three months post quit, in the 40% most deprived within-Board SIMD areas (60% for island NHS Boards) over 1 year ending March 2016.

Key points

Overall in Scotland in 2014/15:

- There were 66,756 quit attempts made with the help of NHS smoking cessation services. One in five (12,692) were still not smoking at three months, a 'quit rate' of 19%;
- Of all these quit attempts, 60% were made in the most deprived areas in Scotland;

In the most deprived areas in Scotland in 2014/15:

- Only one of the 14 NHS Boards in Scotland (NHS Shetland) met their smoking cessation HEAT target;
- Of 39,746 quit attempts, 7,017 were still not smoking at 3 months, a 'quit rate' of 18%, similar to the overall Scotland quit rate;
- This represents 58% of the HEAT target of around 12,000 three month quits in the most deprived areas.

Results and Commentary

1. Quit attempts made and 'self-reported' successful quits at three months after 'quit date'

This chapter presents information on the number of quit attempts made/quit dates set in NHS smoking cessation services in Scotland during 2014/15 and the number of 'self-reported' successful quits and percentage quit rates at three months after a 'quit date'.

The data are presented at NHS Board level and include figures based on total quit attempts made and quit attempts made in the most deprived areas.

1.1 Quit attempts made

There were a total of 66,756 quit attempts made in NHS cessation services in Scotland during 2014/15. This included 39,746 (60%) quit attempts made in the most deprived areas (Table 1).

Table 1: Total number of quit attempts made and quit attempts made in the most deprived areas, by NHS Board; 2014/15

NHS Board of treatment	Total quit attempts	Quit attempts made in the most deprived areas	
		Number	Percentage
Ayrshire & Arran	4,524	2,592	57%
Borders	1,099	643	59%
Dumfries & Galloway	1,742	938	54%
Fife	3,763	2,232	59%
Forth Valley	2,536	1,449	57%
Grampian	6,252	3,790	61%
Greater Glasgow & Clyde	18,183	11,257	62%
Highland	3,204	1,681	52%
Lanarkshire	10,601	5,910	56%
Lothian	9,450	6,013	64%
Orkney	143	87	61%
Shetland	197	137	70%
Tayside	4,897	2,928	60%
Western Isles	165	89	54%
SCOTLAND	66,756	39,746	60%

1.2 Successful quits and percentage quit rates at three months after ‘quit date’

Table 2 presents, by NHS Board:

- The total number of ‘self-reported’ quits at three months after ‘quit date’ during 2014/15 (all-Scotland figure 12,692).
- The three month quit rate achieved in 2014/15 (all-Scotland figure 19%)
- The total number of ‘self-reported’ quits at three months after ‘quit date’, in the most deprived areas, during 2014/15 (all-Scotland figure 7,017).
- The three month quit rate achieved in most deprived areas, in 2014/15 (all-Scotland figure 18%).

The 2014/15 HEAT target was to achieve at least 12,005 successful 3 month quits through smoking cessation services in the most deprived areas.

Table 2: Total number of ‘self-reported’ quits and percentage quit rates, at three months after quit date, for all areas, and the most deprived areas in Scotland, by NHS Board; 2014/15

NHS Board of treatment	Total successful quits		Successful quits in the most deprived areas	
	Number	Quit Rate	Number	Quit Rate
Ayrshire & Arran	965	21%	501	19%
Borders	222	20%	107	17%
Dumfries & Galloway	380	22%	167	18%
Fife	915	24%	520	23%
Forth Valley	372	15%	186	13%
Grampian	1,787	29%	1,064	28%
Greater Glasgow & Clyde	2,288	12%	1,347	12%
Highland	741	23%	362	22%
Lanarkshire	2,196	21%	1,111	19%
Lothian	1,862	20%	1,104	18%
Orkney	62	43%	31	36%
Shetland	67	34%	44	32%
Tayside	763	16%	435	15%
Western Isles	72	44%	38	43%
SCOTLAND	12,692	19%	7,017	18%

The delivery of 7,017 (58%) successful quits (at three months post ‘quit date’) in the most deprived areas during the HEAT period (2014/15), resulted in a 58% achievement of the target set of at least 12,005 self-reported quits at three months post quit date.

Based on achievement over 2014/15, one of the 14 NHS Boards in Scotland (NHS Shetland) achieved their HEAT target (Table 3).

Table 3: Total number of ‘self-reported’ quits at three months after ‘quit date’ made in the most deprived areas against the target number of quits, by NHS board; 2014/15

NHS board of treatment	Successful three month quits in the most deprived areas	Target number of successful three month quits in the most deprived areas	Percentage of target achieved
Ayrshire & Arran	501	814	62%
Borders	107	227	47%
Dumfries & Galloway	167	353	47%
Fife	520	761	68%
Forth Valley	186	607	31%
Grampian	1,064	1,634	65%
Greater Glasgow & Clyde	1,347	2,823	48%
Highland	362	582	62%
Lanarkshire	1,111	1,391	80%
Lothian	1,104	1,765	63%
Orkney	31	36	87%
Shetland	44	35	126%
Tayside	435	884	49%
Western Isles	38	93	41%
SCOTLAND	7,017	12,005	58%

1.3 Performance related factors

Factors that may have had an effect on NHS Board performance towards their HEAT target are detailed below.

The number of quit attempts made with the support of NHS smoking cessation services in Scotland has dropped by 39% since calendar year 2012. The reason for the drop is not completely clear, but the rise in use of electronic cigarettes as an alternative aid to smoking cessation is a plausible explanation. The use of electronic cigarettes as an alternative to tobacco or as an aid to quitting has risen rapidly in Scotland. Data from [The Scottish Household Survey 2014](#) reported that 1 in 20 (5%) of adults aged 16 and over use electronic cigarettes, and around 1 in 3 (32%) of all current smokers who had ever attempted to quit, and recent ex-smokers (who had quit within the past year) have used an electronic cigarette as a product to support their quit attempt.

The figures presented in this report are affected by missing data, as a result of failure to make contact with the client, non-return of follow-up questionnaires; administrative factors such as late receipt of initial quit attempt information; or follow-ups not undertaken or not recorded. Where no follow-up information is available, the quit attempt is assumed to be unsuccessful. This is a conservative approach and is consistent with reporting methods used by services elsewhere. It ensures that quit attempts are not over-estimated but also means that the figures may under-estimate success rates.

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Further Information

Further information can be found on the [smoking cessation area](#) of the [ISD website](#).

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Appendix

A1 – Background Information

A1.1 Scottish Index of Multiple Deprivation (SIMD)

SIMD background information

- The [Scottish Index of Multiple Deprivation \(SIMD\)](#) is the Scottish Government's official tool for identifying areas in Scotland concentrations of deprivation by incorporating several different aspects of deprivation (multiple-deprivations) and combining them into a single index.
- The SIMD is based on small areas called datazones. 2001 datazones were introduced in 2004 based on 2001 Census Output Areas. They were created with a reasonably consistent population size (between 500 and 1,000 household residents), and boundaries set to respect physical boundaries and natural communities as far as possible. At the time of their creation, each 2001 datazone contained around 350 households and had a mean population size of 800 people.
- Scotland is divided into 6,505 '2001 datazones', and for each datazone, a deprivation score is calculated from a large number of indicators in several domains. This is used to determine the ranking for each Data Zone from 1 (most deprived) to 6,505 (least deprived).

SIMD used within this report

- The HEAT target for smoking cessation services is based on 'within-NHS Board SIMD non-population-weighted quintiles.
- Within NHS Board level SIMD quintiles are calculated within each Board, by ranking all data zones in an NHS Board from most to least deprived and then splitting these into 5 deprivation quintiles, with 20% of the datazones in each.
- For the purposes of this report [SIMD 2012](#) non-population-weighted within-board quintiles 1 and 2 have been used to identify the 40% most deprived datazones for mainland NHS Boards, and quintiles 1,2 and 3 to identify the 60% most deprived datazones for the island NHS Boards.
- Within this analysis, for a particular NHS Board of treatment, each NHS Board level quintile is made up of patients treated within that NHS Board. The NHS Board level quintile is based on the patient's datazone of residence, regardless of which NHS board that Data Zone is contained within.
- Analysis is shown by NHS Board of treatment and the patient counted as treated in one board, may be resident in another. For example, for data shown for NHS Ayrshire & Arran, the patients counted as being in the target cohort (the 40% most deprived areas) refers to all patients treated within Ayrshire & Arran with and NHS level quintile 1 or 2 based on their datazone of residence regardless of which NHS Board that datazone is in (for example a patient could reside in NHS Ayrshire & Arran, or another NHS Board such as NHS Borders.

A1.2 Quit definition and calculation of percentage quit rate

A quit at three months after quit date is defined as a quit where the client self-reported as 'not smoked since the one month follow-up or 'smoked between one and five cigarettes since one month follow-up', and in addition had successfully quit at one month.

Three month percentage quit rates are calculated as the total number of quits at three months after quit date, as a percentage of total number of quit attempts made/quit dates set. This approach follows the [Russell standard](#), a well validated approach to measuring outcomes from smoking cessation interventions.

A1.3 The national smoking cessation services monitoring

Further background to the national monitoring and national database is available on the [ASH Scotland web site](#) . Available there are: a copy of the national minimum dataset for smoking cessation services, guidelines for using the minimum dataset, a 'definition of smoking cessation services' to be included in the national monitoring and 'data protection and client confidentiality' guidance.

The national smoking cessation database is a web-based database, accessible at present only over the NHSNet. It currently has over 300 registered users across Scotland. Further information and guidance on how to use the database (including details of how to access the 'test' version of the system) are available from the above ASH Scotland web link.

There is also a [smoking cessation page on the ISD web site](#), which provides information on the national smoking cessation monitoring and national smoking cessation database.

In addition, [A guide to smoking cessation in Scotland 2010](#) contains three documents: Helping smokers to stop: brief interventions; Planning and providing specialist smoking cessation services and; a Brief interventions flowchart. Available here also is a link to the current [definition of a specialist smoking cessation service](#) (i.e. those services which should be included in the national cessation services monitoring). Important: the revision of the definition, in April 2012, has not resulted in any alteration to the types of services to be included in the national monitoring.

A1.4 Electronic Support for Smoking Cessation

The HEAT targets for the Smoking Cessation service has changed the emphasis to the timely and complete submission of information on quit attempts to capture the patient's smoking status at the 12-week milestone. In order to achieve this, an electronic solution was developed to support community pharmacies in managing and reporting patient quit attempts as part of this service. This support has been delivered through the existing Pharmacy Care Record (PCR) application already in use in pharmacies that supports Chronic Medication Service (CMS), pharmaceutical care assessment and management of high risk and new medicine interventions.

From 1 July 2014 minimum data set (MDS) information has been captured, validated and submitted to the national smoking cessation database by the Pharmacy Care Record (PCR) application.

As well as supporting reporting of quit attempts and use of the Smoking Cessation service as part of Health Board HEAT reporting, the information provided electronically has

supported the revised pharmacy remuneration as detailed in Scottish Government circular PCA(P)(2014)7.

A1.5 Previous smoking cessation HEAT targets

A series of [HEAT targets for the NHS](#) were published in 2007, including a target related to smoking cessation. This target was: 'Through smoking cessation services, support 8% of each NHS Board's smoking population in successfully quitting (at one month post quit) over the period 2008/09 to 2010/11'. This was measured through a separate target monitoring process, using data from the national cessation services monitoring and national database. [Final data on performance against the target](#) was published in September 2011.

From 1st April 2011, there was a [successor smoking cessation HEAT target](#) for 2011/12 to 2013/14 which had an explicit focus for the first time on inequalities in smoking rates. The target is 'To deliver at least 80,000 successful quits (at one month post quit) including 48,000 in the 40% most deprived within-Board SIMD areas over the three years ending March 2014'. [Final performance figures against the target](#) were published in September 2014.

A2 – Publication Metadata (including revisions details)

Metadata Indicator	Description
Publication title	NHS Smoking Cessation Service Statistics (Scotland) 1 st April 2014 to 31 st March 2015
Description	This release presents data on quit attempts made with the help of NHS smoking cessation services and 'self-reported' quits and percentage quit rates at three months after 'quit date', for NHS boards in Scotland, 1 st April 2014 to 31 st March 2015.
Theme	Health & Social Care
Topic	Lifestyles & Behaviours
Format	PDF document
Data source(s)	The national minimum dataset for smoking cessation services in Scotland plus local NHS Board information systems (Greater Glasgow & Clyde NHS board).
Date that data are acquired	19 th August 2015
Release date	6 th October 2015
Frequency	Annual
Timeframe of data and timeliness	Data for the period 1 st April 2014 to 31 st March 2015. Release published to new October timescale.
Continuity of data	The data tables included in this seventh annual 'short report' in support of smoking cessation HEAT target monitoring are similar to those included in the previous six reports. Differing in terms of time period reported on, and 3 months follow-up data instead of previously reported one month data.
Revisions statement	No revisions to this publication are planned.
Revisions relevant to this publication	n/a
Concepts and definitions	Background to the national smoking cessation services monitoring and national smoking cessation services database are available on the ASH Scotland website .
Relevance and key uses of the statistics	The national cessation monitoring analyses produced by ISD are used to provide vital evidence of the reach and success of NHS smoking cessation services in Scotland. The cessation monitoring data are also used for smoking cessation HEAT (Health Improvement, Efficiency, Access and Treatment) target monitoring.
Accuracy	Data were cross-checked against national smoking cessation database 'standard reports', results from the previous annual monitoring reports and quarterly monitoring reports produced 'for management information purposes'. Statistics for Greater Glasgow & Clyde (where data are provided from local information systems) were checked with Greater Glasgow & Clyde data providers.
Completeness	There is evidence, across Scotland, of data under-recording/late submission in relation to pharmacy cessation services. An electronic solution was developed to support community pharmacies in managing and reporting patient

	quit attempts as part of this service. Further details are provided in Appendix A1.4 .
Comparability	Routine data from smoking cessation services are also collected in England, Northern Ireland and Wales. Statistics are published on the following websites for each. England: Public Health section of the Health and Social Care Information Centre website . Northern Ireland: Publication section on the Department of Health, Social Services and Public Safety website Wales: Stop Smoking Wales section of Public Health Wales Observatory Please note that care should be taken when attempting to make 'direct' comparisons across the countries.
Accessibility	It is the policy of ISD Scotland to make its web sites and products accessible according to published guidelines .
Coherence and clarity	The report includes detail on the background to the national smoking cessation services monitoring in Scotland as well as analysis results. The report layout is similar to that of previous years. The report is available as a PDF file.
Value type and unit of measurement	'Numbers' of quit attempts, and 'numbers' of three month self-reported quit successes are presented.
Disclosure	Low risk of disclosure linked to the data published. No disclosure control methods were applied. The ISD Statistical Disclosure Control Protocol is followed.
Official Statistics designation	Official Statistics
UK Statistics Authority Assessment	Under assessment
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A3 – Early Access details (including Pre-Release Access)

Pre-Release Access

Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", ISD are obliged to publish information on those receiving Pre-Release Access ("Pre-Release Access" refers to statistics in their final form prior to publication). The standard maximum Pre-Release Access is five working days. Shown below are details of those receiving standard Pre-Release Access and, separately, those receiving extended Pre-Release Access.

Standard Pre-Release Access:

Scottish Government Health Department (Analytical Services Division)
NHS Board Chief Executives
NHS Board Communication leads
Health Improvement Programme Manager (Tobacco) NHS Health Scotland

Early Access for Management Information

These statistics will also have been made available to those who needed access to 'management information', ie as part of the delivery of health and care:

NHS Board smoking co-ordinators

Early Access for Quality Assurance

These statistics will also have been made available to those who needed access to help quality assure the publication:

Data Manager for Smokefree Services, NHS Greater Glasgow & Clyde

A4 – ISD and Official Statistics

About ISD

Scotland has some of the best health service data in the world combining high quality, consistency, national coverage and the ability to link data to allow patient based analysis and follow up.

Information Services Division (ISD) is a business operating unit of NHS National Services Scotland and has been in existence for over 40 years. We are an essential support service to NHS Scotland and the Scottish Government and others, responsive to the needs of NHS Scotland as the delivery of health and social care evolves.

Purpose: To deliver effective national and specialist intelligence services to improve the health and wellbeing of people in Scotland.

Mission: Better Information, Better Decisions, Better Health

Vision: To be a valued partner in improving health and wellbeing in Scotland by providing a world class intelligence service.

About ScotPHO

The Scottish Public Health Observatory (ScotPHO) collaboration is led by ISD Scotland and NHS Health Scotland, and includes the Glasgow Centre for Population Health, National Records of Scotland and Health Protection Scotland. Our aim is to make public health information more accessible and usable to improve health and reduce inequalities in Scotland.

Official Statistics

Information Services Division (ISD) is the principal and authoritative source of statistics on health and care services in Scotland. ISD is designated by legislation as a producer of 'Official Statistics'. Our official statistics publications are produced to a high professional standard and comply with the Code of Practice for Official Statistics. The Code of Practice is produced and monitored by the UK Statistics Authority which is independent of Government. Under the Code of Practice, the format, content and timing of statistics publications are the responsibility of professional staff working within ISD. ISD's statistical publications are currently classified as one of the following:

- National Statistics (ie assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (ie legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (ie still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on ISD's statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the [ISD website](#). The United Kingdom Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and

signifying compliance with the Code of Practice for Official Statistics. Designation can be broadly interpreted to mean that the statistics:

- meet identified user needs;
- are well explained and readily accessible;
- are produced according to sound methods, and
- are managed impartially and objectively in the public interest.

Once statistics have been designated as National Statistics it is a statutory requirement that the Code of Practice shall continue to be observed.