

NHS Smoking Cessation Service Statistics (Scotland)

1st January to 31st December 2009

1. Introduction

This report provides an analysis of **NHS smoking cessation services uptake and outcomes during the calendar year 1st January to 31st December 2009**. The information presented is taken from the agreed national minimum dataset for smoking cessation services (developed by PATH, part of ASH Scotland) and is **based on 'quit attempts' made** during the year (data recorded as at 1st April 2010). This is **the fourth annual release of statistics from the minimum dataset monitoring in Scotland**. This year's annual monitoring report is based on the revised national minimum dataset which was introduced in January 2009.

The primary source of the data is the National Smoking Cessation Database. The database was established by ISD Scotland in July 2005 to capture the minimum dataset information plus additional local data items and to provide local functionality such as statistical reports. It is a web-based database, accessible at present only over the NHSNet and has over 300 registered users across Scotland. **The second data source, in the case of Greater Glasgow & Clyde NHS board, is local information systems.**

A copy of the national minimum dataset is included at Appendix 1. and at Appendix 2. a definition of the services to be included in the national monitoring. Further background to the national monitoring and national database is available at http://www.ashscotland.org.uk/ash/ash_display.jsp?pContentID=4240&p_applic=CCC&p_service=Content.show&

2. Statistics included in the report

Presented in this report are statistics, for NHS board areas in Scotland, on **quit attempts made/quit dates set** during the 2009 calendar year. Included also are **quit outcomes based on client follow-up at one month and three months after the quit date**. The three month follow-up findings are for quit dates set during the first nine months of the year as data for the last quarter are incomplete.

The statistics are based on the 2009 calendar, rather than financial, year in line with previous national monitoring reports. Wherever possible, 2008 comparisons are included. These are based on revised 2008 figures (figures have been revised since the May 2009 publication to take account of late receipt or entry of data). The publication of this year's annual report, as last year, has been moved to the end of May, from the end of March in the first two years, to improve data completeness. Even with the change of date, **2009 figures are expected to rise in future due to late receipt and entry of data**, particularly for pharmacy services in some boards.

This fourth national report replicates the analyses produced last year. It also includes for the first time one month quit outcomes for pregnant women and for Community Health Partnership/Community Health and Care Partnership areas, as well as one month quit outcomes by SIMD (Scottish Index of Multiple Deprivation) and by pharmacotherapy used.

December 2007 saw the publication of a series of new HEAT targets for the NHS. One of these relates to the proportion of the smoking population in each board area supported, via cessation services, to achieve a successful one month quit - <http://www.scotland.gov.uk/Publications/2007/12/11103453/0> The target (which covers the period 2008/09 to 2010/11) is being measured through a separate target monitoring process, using data from the national cessation services monitoring and national database.

3. Warnings on comparing data across NHS board areas

Care should be taken in comparing data across NHS board areas. The figures presented here show wide variation in uptake rates and quit rates across boards. There may be a number of explanations for this. **There are, for instance, variations in the types of services provided in different boards.** In some board areas clients of specialist smoking cessation services account for the majority of records, whilst in others most of the data comes from pharmacy services. Areas who have a large pharmacy scheme (which will tend to see large numbers of people), such as Greater Glasgow & Clyde, may have amongst the highest annual service uptake rates. Meanwhile, those where most of the data are coming from specialist cessation services (relatively fewer clients seen, but more intensive support provided), may have amongst the highest percentage quit rates.

There is evidence too, across Scotland, of data under-recording in relation to pharmacy cessation services (for example, as a result of non-submission of minimum dataset forms, late submission of forms or forms poorly completed). Data collection problems within the national pharmacy smoking cessation scheme are now being addressed centrally By Scottish Government Public Health and Primary Care colleagues, in conjunction with ISD Scotland and Practitioner Services Division (PSD) of NHS National Services Scotland, alongside continuing efforts locally in NHS boards.

Quit rates are calculated as the number of records where the client self-reported as 'not smoked, even a puff, in the last two weeks' (one month follow-up) or 'smoked up to five cigarettes since one month follow-up' (three and 12 month follow-up) as a percentage of total quit attempts made/quit dates set. As the denominator (as it is in the English quit rate calculations) is total quit dates set, this means that **where there are large numbers of cases 'lost to follow-up'/smoking status unknown this will greatly lower the percentage quit rate.** In Scotland, the proportion of cases 'lost to follow-up'/unknown at one month (note: the English monitoring does not include three or 12 month follow-up) is higher than the English findings. There are also NHS boards in Scotland with particularly high percentages of cases 'lost to follow-up'/unknown. **Care should be taken though in making direct comparisons between the Scotland and England one month quit rates.** There may be differences, for example, in the types of services included in the English monitoring, or the profile of clients seen in services.

Included in the report are statistics on CO validated quits¹, as well as self-reported quits, although care should be taken in interpreting these as there remain variations across the country in the proportion of cases where CO validation has been attempted.

¹ Carbon monoxide (CO) validation measures the level of carbon monoxide in the bloodstream and provides an indication of the level of use of tobacco.

4. Additional data warnings/data limitations

As noted above, the **data presented in this report are based on 'quit attempts' made/quit dates set during the year.** This will not include referrals or initial contacts where the client did not go on to set a quit date, or 'relapse prevention' support. The information in the report represents, therefore, only a proportion of the work of NHS smoking cessation services.

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.

5. Analysis Findings

Quit attempts made

- **There were a total of 69,882 quit attempts made/quit dates set in the 12 months from 1st January to 31st December 2009** (data recorded on the national database, as at 1st April 2010, combined with data supplied from local information systems in Greater Glasgow & Clyde). **This compares with 51,621 quit attempts during the previous calendar year (revised 2008 figures), representing an increase of 18,261 (or 35%), see Table 1.** In all 14 NHS boards numbers were up on 2008.
- The **revised 2008 figure for the total number of quit attempts made (51,621) represents an increase of 1,500 (3.0%) on the previously published figure of 50,121.** As noted above, there are recognised difficulties with the late submission of data, especially from pharmacies.
- With regard to monthly quit attempts made, **numbers were highest in January (note: the start of the year is the most popular time for people to attempt to quit, e.g. New Year's resolution), followed by March, then February, see Figure 1.** Note: figures for the latter months of the year are expected to increase in future due to delays in receipt of data and data recording.
- **An estimated 6.5% of the smoking population made a quit attempt with an NHS smoking cessation service between 1st January and 31st December 2009 (4.8% in 2008).** This is calculated as - total quit attempts made/quit dates set as a percentage of total smokers (Scottish Household Survey estimate, 2007/2008). NHS board smoking prevalence figures have been calculated on the combined Scottish Household Survey (SHS) data for 2007 and 2008 as the sample sizes for smaller boards are too small when based on a single year and lead to large fluctuations in prevalence rates which may be misleading. Note: the 2008 figures have been recalculated using the 2007/2008 Scottish Household Survey (previously published figures were based on the 2007 survey).
- **Service uptake rates varied considerably across NHS board areas (ranging from 1.9% in Orkney to 8.7% in Lanarkshire).** There are differences in the types of services provided in different areas. For some areas the majority of records are from specialist smoking cessation services. For others the majority of records are from pharmacies (larger numbers of people seen, but less intensive support provided).

- **Included also are statistics on quit attempts made by CHP/CHCP area².** These are based on the client's area of residence. Using Scottish Household Survey estimates (2007/2008) of smoking population in these areas estimates have been made of service uptake rates for CHPs/CHCPs. **The highest rates were found in areas in Lanarkshire and Greater Glasgow & Clyde: North Lanarkshire 8.9% of estimated total smokers, East Dunbartonshire 9.2%, and East Glasgow 9.4%, Table 2.** Note: the CHP/CHCP area of the client may differ from the area in which they receive cessation support (e.g. a client attending a service in Lothian, but resident in Borders).

Quit attempts made – client profile

- **Fifty-nine per cent of quit attempts were by females and 41% males, Figure 2.** Given that adult smoking rates for males and females are similar (26% for males and 25% for females, from the 2008 Scottish Household Survey) this demonstrates a higher service uptake rate for women. Comparable figures for England (April to December 2009 quit dates) were 52% females and 48% males.
- **The under 25s age group accounted for 9% of quit attempts made; 25-34s 18%; 35-44 24%; 45-59 30%; 60 years plus 18% and 'unknown' 1%, see Figure 3.** Meanwhile, according to the 2008 Scottish Household Survey, the highest smoking prevalence (at 30%) is in the 25-34s age group.
- **For 90% of quit attempts the client's ethnic group was 'White-British'; 'White-Other' almost 2% ; 'Other Ethnic Group' 1% and 'unknown' 7%, see Figure 4.** Note: according to the 2001 Census minority ethnic groups formed 2.0% of the Scottish population.
- **Eighty-seven per cent of quit attempts were for people living in urban areas, 12% rural areas³ and 1% 'unknown', Figure 5.** According to the Scottish Government Urban Rural Classification 2007-2008 82% of Scotland's population is living in urban areas and 18% in rural areas. Scottish Household Survey smoking prevalence estimates also reveal relatively higher smoking prevalence in urban areas.
- **An analysis of quit attempts made by SIMD 2009 deprivation category shows the largest numbers to be in the most deprived categories and the smallest in the least deprived.** Similarly, Scottish Household Survey estimates (2007/2008) reveal the largest numbers of smokers in Scotland, and highest smoking prevalence, to be in the most deprived areas, Figure 6⁴. **Those living in the most deprived communities (equivalent to SIMD 1-2, Figure 6) account for an estimated 31% of total smokers in Scotland and they account for 35% of quit attempts made in NHS cessation services in 2009.**

² Community Health Partnership/Community Health and Care Partnership Area.

³ Based on the Scottish Government Urban Rural Classification 2007-2008.

⁴ The SIMD (Scottish Index of Multiple Deprivation) 2009 10 deciles classification has been calculated using datazone information (converted from the client's full postcode, which is part of the national minimum dataset). Scottish Household Survey (SHS) estimates (2007/2008) of the number of smokers by SIMD are based on SIMD 2006.

Note: excludes cases where SIMD is 'unknown'. Please see also Appendix 3. 'Supplementary Tables' for NHS board breakdowns.

- **There were a total of 1,865 quit attempts made by pregnant women during 2009. This compares with 1,751 in 2008 (revised 2008 figure), an increase of 114 or almost 7.0%. An estimated 17% of all women smoking during pregnancy⁵ attempted to quit using NHS cessation services, in 2009, see Table 3.** Note: the figure of 17% is based on an estimate of 10,733 women smoking in pregnancy in 2008 (provisional figure), the most recent year for which data are available. Please see also Appendix 3. 'Supplementary Tables' for NHS board breakdowns.

Quit attempts made – pharmacy smoking cessation services and other NHS cessation services

- In 2009, for the first time, pharmacy smoking cessation services accounted for the largest share of quit attempts made in NHS cessation services in Scotland. This follows the introduction of the new Public Health Service (PHS) contract for pharmacy smoking cessation services at the end of August 2008. Pharmacies tend to see a larger number of clients, but have relatively lower percentage quit rates than, for example, specialist cessation services which provide more intensive support. **Nationally, in 2009, the split was 56% of quit attempts made in pharmacies and 44% in non-pharmacy services, whilst for Tayside, Greater Glasgow & Clyde, Ayrshire & Arran and Grampian between 62% and 83% of all quit attempts were in pharmacies,** see Table 4.

Quit attempts made – pharmacotherapy used

- **The largest share of quit attempts, 55,234 or 79%, involved the use of NRT (nicotine replacement therapy) only; Varenicline (Champix) 8,063 or almost 12%; NRT and Varenicline (i.e. change in product) 395 or less than 1.0%; Bupropion 266 cases and NRT and Bupropion (change in product) 47 cases. A further 1,513 quit attempts (2%) were recorded as pharmacotherapy 'none' and 4,364 or 6% pharmacotherapy details unknown, Figure 7. There was a reduction in both the number and percentage of quit attempts involving the use of Varenicline in 2009.** Please see also Appendix 3. 'Supplementary Tables' for NHS board breakdowns.
- From January 2009 it is possible to distinguish between the use of 'NRT-single product' and 'NRT – more than one product'. The majority of quit attempts involving NRT only (47,808 or 87%) were 'NRT – single product',

⁵ Based on SMR02 (Scottish Morbidity Record) estimates of the number of pregnant women smoking at antenatal booking (2008). In recent years there have been concerns about the completeness and quality of the SMR02 data. There is considerable pressure on women not to smoke during pregnancy and it is anticipated that some women may not be completely truthful when describing their smoking behaviour at the booking clinic. The level of 'not known' increased from 5.0% in 1995 to 14.1% in 2008 and may include a proportion of smokers.

whilst 6,740 (12%) were 'NRT- more than one product' and the remaining 1.0% not specified whether single product or more than one product.

Quit outcomes at one month after the 'quit date'

- **Of the 69,882 quit attempts made between 1st January and 31st December 2009, 26,485 were recorded as a successful quit at one month after the 'quit date'.** This figure is based on client self-reported 'not smoked, even a puff, in the last two weeks'. Follow-up may have been undertaken 'face to face', by telephone or by letter/written questionnaire. **Of the remaining 43,397 cases 11,794 had smoked in the last two weeks and 31,603 were 'lost to follow-up'/unknown,** see Table 5. The latter will include a small proportion of cases (around 1% of the total) where client did not consent to follow-up or client had died. More commonly 'lost to follow-up'/unknown will be due to failure to make contact with the client/non-return of follow-up questionnaire; or more administrative factors such as late receipt of initial quit information (i.e. not received in time to conduct one month follow-up); or follow-ups not undertaken or not recorded/not yet recorded. **The total of 26,485 one month quits (self-reported) in 2009 represents an increase from 20,188 in 2008 (revised 2008 figures), a rise of 6,297 or 31%.**
- **The Scotland percentage quit rate at one month (self-reported) was 38%, with 17% still smoking and 45% 'lost to follow-up'/smoking status unknown. This compares with a 39% quit rate (self-reported) in 2008 (revised 2008 figures).** The most recent English monitoring figures show a one month percentage quit rate of 48%, with 27% still smoking and 25% 'lost to follow-up'/unknown. As noted earlier, care should be taken in making direct comparisons between the Scotland and England one month quit rates. It is important to note too that there has been a substantial increase in the percentage of cases in Scotland recorded as 'lost to follow-up'/smoking status unknown due to a change in how the Greater Glasgow & Clyde outcomes at one month are recorded. **Previously, Greater Glasgow & Clyde clients no longer in service/not contactable at the time of one month follow-up were assumed to have relapsed and were recorded as a 'smoker', but for the first time in this year's annual report these cases are recorded as 'lost to follow-up'/unknown, as is the case in the other NHS boards. Note: this change applies to both the 2009 figures and the revised 2008 figures.**
- **As with service uptake, there was wide variation across the country in one month quit rates. The highest quit rates (self-reported) were 46% in Highland, 49% in Orkney and 52% in Western Isles,** see Table 5. Differences in the types of services provided is likely to influence this (e.g. support provided by pharmacies is less intensive than that offered by specialist services, so for boards where a large number of quit attempts take place in pharmacies overall percentage quit rates may be lower). **It is especially important to be aware of the influence of cases 'lost to follow-up'/unknown on quit rates.** There are three NHS boards (Tayside, Ayrshire & Arran and Greater Glasgow & Clyde) where over half of all cases are 'lost to follow-up'/unknown smoking status at one month after follow-up. In all three boards the percentage of cases coming from pharmacy cessation services is above the Scotland average (between 62% and 78%, compared with a Scotland average of 56%).

- **Calculating the one month success rate as a percentage of total estimated smokers in the population, the best performing boards were Lanarkshire, Borders and Western Isles, achieving one month quits for an estimated 3.1%, 3.5% and 3.7% of their respective smoking populations (Scotland 2.5%), see Table 5.**
- **Of the total 26,485 'self-reported' one months quits in Scotland in 2009, 11,791 (45%) were in pharmacy services and 14,694 (55%) in non-pharmacy NHS cessation services. The percentage quit rate at one month was 30% for pharmacy services and 48% for non-pharmacy services, see Tables 6 and 7.**
- **Based on 'self-reported' quits, 38% of quit attempts were successful at one month. Using the CO validated quit findings this reduces to 22% (most recent English figure – 33% and Scotland 2008 figure 23%), but there remain a relatively high proportion of cases where a reading was not taken, Table 8.**
- **The highest percentage CO validated one month quit rates for NHS board areas were: 34% in Ayrshire & Arran and 47% in Orkney.**
- **This year's annual report includes for the first time one month quit outcomes for pregnant women and for Community Health Partnership/Community Health and Care Partnership (CHP/CHCP) areas, as well as one month quit outcomes by SIMD (Scottish Index of Multiple Deprivation) and by pharmacotherapy used. One month quit outcomes for CHP/CHCP areas are included in Supplementary Table E, Appendix 3. Included here are 'successful one month quits as a percentage of the total estimated smokers in the population'. This ranges from 0.7% of estimated smokers in Glenrothes and North East Fife to 3.6% of estimated smokers in Scottish Borders. One month quit outcomes by SIMD reveal decreasing quit rates from the least deprived areas (9/10) through to the most deprived (1/2), however overall numbers of quitters in the most deprived areas (1/2) are still higher than in any of the other deprivation deciles, Table 9. One month quit outcomes for pregnant women show that of the 1,865 quit attempts made by pregnant women in 2009, 568 (30%) were a successful self-reported quit at one month after quit date, see Table 10. Lastly, one month quit outcomes by pharmacotherapy used show the highest percentage quit rate, self-reported, at one month to be for those clients using Varenicline (60%), Table 11. Care should be taken, though, in interpretation of the figures here as there are likely to be a variety of factors influencing quit success. For example, quit attempts using Varenicline are more likely to take place in non-pharmacy cessation services – more intensive support provided than in pharmacy cessation services, with higher percentage quit rates and lower 'lost to follow-up' rates.**

3 month outcomes

- **From a total of 57,743 quit attempts made/quit dates set between 1st January and 30th September 2009, 21,785 were recorded as successful quits at one month follow-up and 8,761 still quit at three months (comprises: 8,200 not smoked since one month follow-up and 561 'smoked up to 5 cigarettes'). Of the remaining 13,024 cases, 2,577 had relapsed (over 5 cigarettes smoked since**

one month follow-up) and 10,447 were 'lost to follow-up'/smoking status unknown (see Table 12.). Note: the time period is January to September 2009 as three month follow-up data for the whole year are not yet complete. As with one month follow-up, figures are based on client self-reported smoking status, but **the definition of a quit at three months is 'smoked up to 5 cigarettes since one month follow-up'**. The clients eligible for follow-up at three months (according to the PATH minimum dataset guidelines) are those recorded as a successful 'self-reported' quit at one month.

- **The Scotland percentage quit rate at three months was 15% (20% in 2008, for the same nine month period). This is based on a denominator of all quit dates set during the time period, i.e. Jan. to Sep. 2009.** Reasons for a drop-off in quit rates between one and three months would be: clients resuming smoking again, unable to contact client/non-response and for a small number of clients 'no consent to follow-up' or 'client died'. As at one month follow-up, however, **follow-ups not undertaken/information not recorded, or not yet recorded (e.g. due to limited admin. resources or late receipt of data) is also a factor.**
- **The highest three month percentage quit rates for NHS boards were: 23% in Highland, 28% in Orkney and 31% in Western Isles.**

12 month outcomes

- **Quit outcomes based on client follow-up at 12 months after the quit date use data for the 2008 calendar year** (12 month outcomes for the full 2009 calendar year are not yet available). There were a total of 51,621 quit attempts made in 2008 (revised 2008 figures). **Of these, 20,188 were recorded as a successful quit at one month (self-reported), 8,979 were recorded as quit at 3 months and 3,626 quit at 12 months. This represents a quit rate of 39% at one month, reducing to 17% at three months and 7% at 12 months (this compares with 38%, 19% and 8% respectively in 2007).** As noted above, the reduction in quit rates between one and three months will be due to a combination of: clients relapsing and cases 'lost to follow-up'/smoking status unknown. Similarly, the drop-off in quit rates between three and 12 months (from 17% down to 7% in 2008) will reflect a mix of client relapse and 'lost to follow-up'/unknown. **The cumulative percentages of cases 'lost to follow-up'/smoking status unknown at one, three and 12 months were 44%, 59% and 66% respectively, see Figure 8.**

Table 1. Number of quit attempts made/quit dates set (1st January to 31st December 2009) by NHS board*

NHS Board	Month												Total ¹	Estimated total smokers (Scottish Household Survey, SHS, 2007/2008) ³	Estimated annual service uptake rate (% of total smokers - SHS, 2007/2008)	2008 figures (revised) - total quit attempts & % of total smokers (SHS, 2007/2008)	
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec					
Ayrshire & Arran	515	370	358	264	222	186	196	246	208	211	243	142	3,161	78,529	4.0%	3,091	3.9%
Borders	206	196	195	151	151	116	113	108	123	115	91	58	1,623	20,126	8.1%	1,175	5.8%
Dumfries & Galloway	236	226	266	198	207	182	132	144	176	133	115	119	2,134	33,159	6.4%	1,607	4.8%
Fife	362	292	355	291	300	279	265	273	302	266	231	170	3,386	78,247	4.3%	2,818	3.6%
Forth Valley	564	350	382	262	269	264	228	224	198	187	174	92	3,194	66,011	4.8%	2,058	3.1%
Grampian	788	603	688	500	512	450	375	366	409	394	309	185	5,579	101,675	5.5%	4,826	4.7%
Greater Glasgow & Clyde ²	2,750	2,222	2,626	2,150	1,782	1,755	1,485	1,544	1,720	1,637	1,727	550	21,948	268,860	8.2%	16,769	6.2%
Highland	430	387	438	384	301	310	249	257	279	214	233	132	3,614	56,762	6.4%	2,712	4.8%
Lanarkshire	1,866	1,356	1,322	1,146	934	782	734	770	725	718	669	333	11,355	131,178	8.7%	7,740	5.9%
Lothian	1,052	914	1,011	798	760	750	653	675	630	756	643	373	9,015	153,274	5.9%	5,514	3.6%
Orkney	12	8	10	3	1	6	2	5	3	4	3	2	59	3,096	1.9%	45	1.5%
Shetland	18	18	16	20	20	21	19	9	15	14	13	11	194	3,040	6.4%	96	3.2%
Tayside	522	408	489	381	397	384	277	297	352	285	260	203	4,255	79,612	5.3%	3,027	3.8%
Western Isles	30	19	24	24	31	21	29	27	36	49	52	23	365	5,198	7.0%	143	2.8%
Scotland	9,351	7,369	8,180	6,572	5,887	5,506	4,757	4,945	5,176	4,983	4,763	2,393	69,882	1,067,826	6.5%	51,621	4.8%

Notes

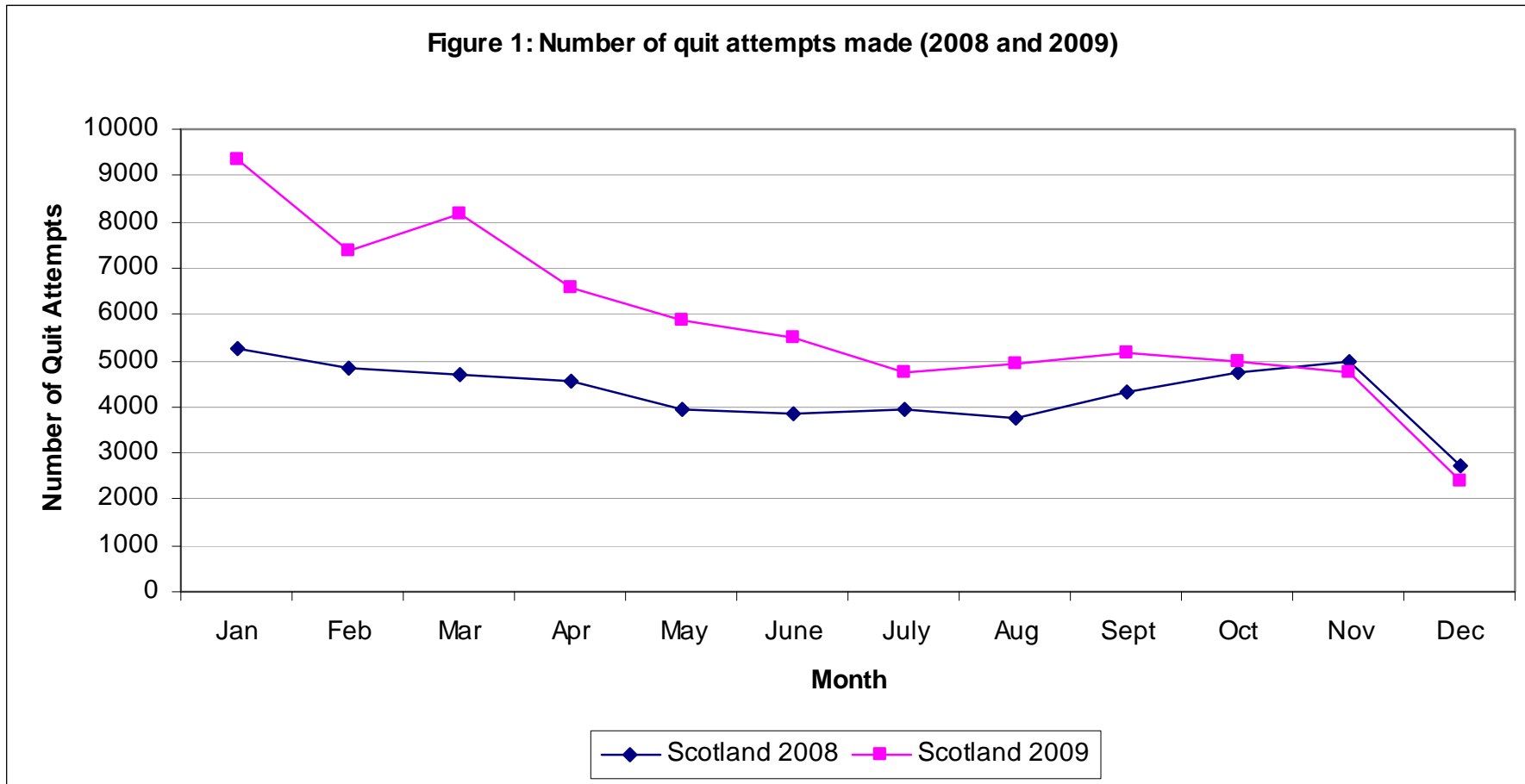
¹ Figures for the latter part of the year and the 2009 total are expected to increase in future due to late submission of data/data recording, particularly in relation to pharmacy records.

² Greater Glasgow & Clyde - data provided from local information systems.

³ The Scotland figure does not equal the sum of the NHS board figures as it has been derived from the Scottish percentage and population figure directly.

* Number of quit attempts rather than number of clients with a quit attempt, so could include repeat quit attempts for the same client

Figure 1: Number of quit attempts made (2008 and 2009)



Note: Figures for the latter part of 2009 are expected to increase in future due to late submission of data/data recording, particularly in relation to pharmacy records.

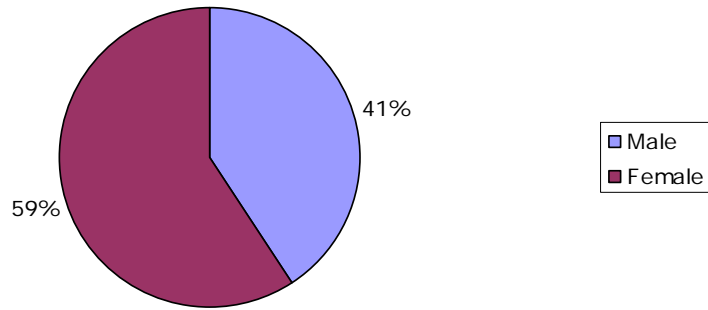
Table 2. Number of quit attempts made/quit dates set (1st January to 31st December 2009) by CHP/CHCP Area

Community Health Partnership/Community Health and Care Partnership (CHP/CHCP)	Quit attempts made/quit dates set (2009)	Estimated total smokers (Scottish Household Survey, SHS, 2007/2008) ¹	Estimated annual service uptake rate (% of total smokers - SHS)
Aberdeen City Community Health Partnership	2,433	44,323	5.5%
Aberdeenshire Community Health Partnership	2,506	38,857	6.4%
Angus Community Health Partnership	1,377	21,493	6.4%
Argyll & Bute Community Health Partnership	911	15,838	5.8%
Clackmannanshire Community Health Partnership	692	12,324	5.6%
Dumfries & Galloway Community Health Partnership	2,131	33,159	6.4%
Dundee Community Health Partnership	1,763	31,287	5.6%
Dunfermline & West Fife Community Health Partnership	2,013	25,544	7.9%
East Ayrshire Community Health Partnership	1,043	24,923	4.2%
East Dunbartonshire Community Health Partnership	1,305	14,109	9.2%
East Glasgow Community Health & Care Partnership	3,117	33,151	9.4%
East Lothian Community Health Partnership	798	15,292	5.2%
East Renfrewshire Community Health & Care Partnership	860	13,523	6.4%
Edinburgh Community Health Partnership	4,380	83,509	5.2%
Falkirk Community Health Partnership	1,609	37,279	4.3%
Glenrothes & North East Fife Community Health Partnership	432	27,726	1.6%
Inverclyde Community Health Partnership	1,329	16,366	8.1%
Kirkcaldy & Levenmouth Community Health Partnership	1,017	22,123	4.6%
Mid Highland Community Health Partnership	732	23,176	3.2%
Midlothian Community Health Partnership	1,203	18,212	6.6%
Moray Community Health & Social Care Partnership	631	18,678	3.4%
North Ayrshire Community Health Partnership	1,430	34,463	4.1%
North Glasgow Community Health & Care Partnership	1,903	26,731	7.1%
North Highland Community Health Partnership	409	6,784	6.0%
North Lanarkshire Community Health Partnership	7,140	79,816	8.9%
Orkney Community Health Partnership	60	3,096	1.9%
Perth & Kinross Community Health Partnership	1,088	26,815	4.1%
Renfrewshire Community Health Partnership	2,799	34,762	8.1%
Scottish Borders Community Health & Care Partnership	1,616	20,116	8.0%
Shetland Community Health Partnership	169	3,040	5.6%
South Ayrshire Community Health Partnership	745	19,163	3.9%
South East Glasgow Community Health & Care Partnership	1,919	26,353	7.3%
South East Highland Community Health Partnership	1,341	17,581	7.6%
South Lanarkshire Community Health Partnership	5,749	67,023	8.6%
South West Glasgow Community Health & Care Partnership	2,819	32,750	8.6%
Stirling Community Health Partnership	894	16,743	5.3%
West Dunbartonshire Community Health Partnership	1,675	20,310	8.2%
West Glasgow Community Health & Care Partnership	2,375	38,197	6.2%
West Lothian Community Health & Care Partnership	2,267	35,736	6.3%
Western Isles Community Health & Social Care Partnership	343	5,198	6.6%
Unknown	859	-	
Scotland	69,882	1,067,826	6.5%

Notes

¹ Care should be taken with interpretation for the smaller areas as sample sizes will be small. Also, the Scotland figure does not equal the sum of the CHP/CHCP figures as it has been derived from the Scottish percentage and population figure directly

Figure 2: Quit attempts made, by gender (Scotland, 2009)



Note: excludes 0.2% of cases 'unknown'.

Figure 3: Quit attempts made by age group (Scotland, 2009)

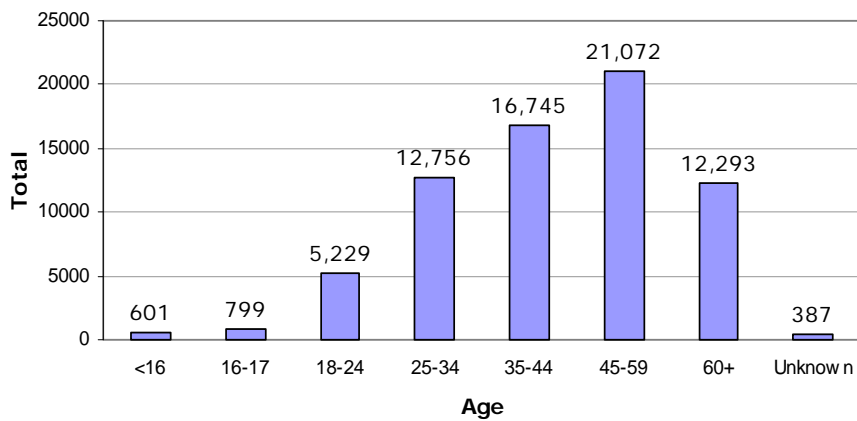


Figure 4: Quit attempts made by ethnic group (Scotland, 2009)

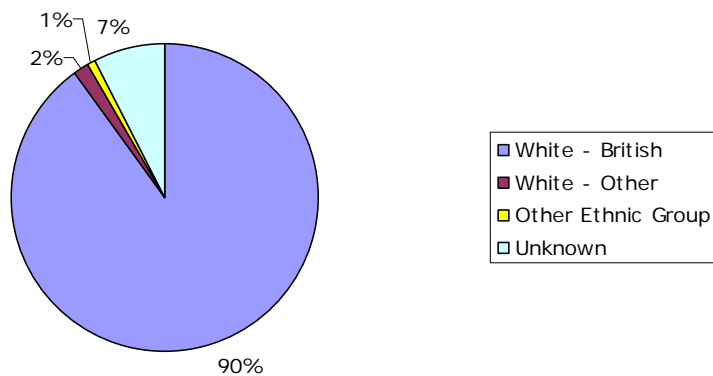


Figure 5: Quit attempts made - urban/rural areas (Scotland, 2009)

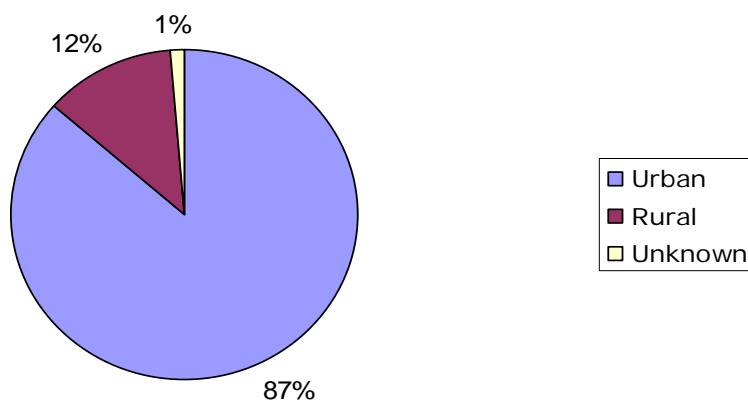
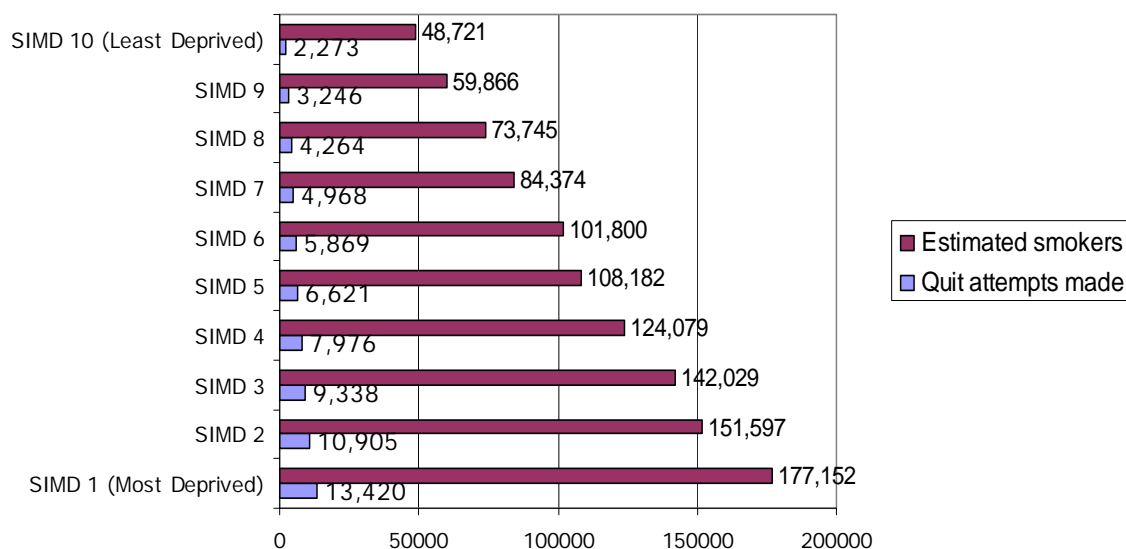


Figure 6: Quit attempts made by SIMD 2009 deprivation decile (Scotland, 2009)



Note: The SIMD (Scottish Index of Multiple Deprivation) 2009 10 deciles classification has been calculated using datazone information (converted from the client's full postcode, which is part of the national minimum dataset). For analyses using SIMD 2009 ISD have changed their labelling and now label the categories as 1=most deprived to 10=least deprived. Our policy of population-weighting the deciles remains unchanged, so the datazones contained within each decile will differ slightly to those presented in Scottish Government releases. Excluded from Figure 6. are 1,002 quit attempts where SIMD was 'unknown' due to either missing postcode details, or a postcode without deprivation information attached. Scottish Household Survey (SHS) estimates (2007/2008) of the number of smokers by SIMD are based on SIMD 2006.

Table 3. Quit attempts made – pregnant females (Scotland, 2009)

	Quit attempts made (2009)	Women smoking in pregnancy (SMR02, 2008 provisional)	Estimated % of pregnant smokers attempting to quit using NHS cessation services	Quit attempts made (2008)
Pregnant females	1,865	10,733	17%	1,751

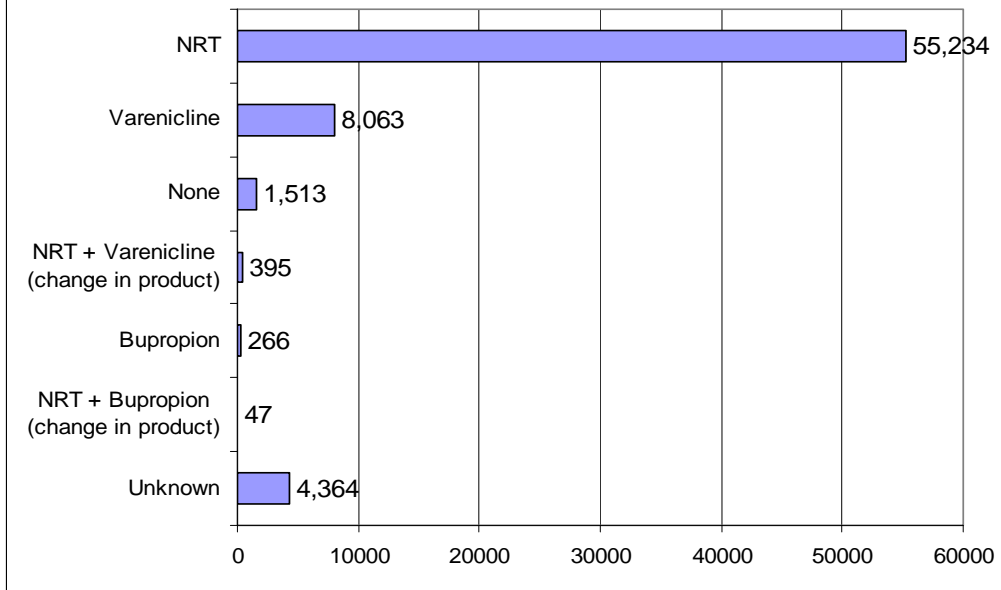
Note: 2008 is the latest year for which SMR02 data are available. See also footnote 5. on page 5. for warnings regarding SMR02 data quality and completeness.

Table 4. Quit attempts made in pharmacy services and in non-pharmacy NHS cessation services (NHS Boards, 2009)

NHS Board	Pharmacy	Non-pharmacy	Total NHS Board
Ayrshire & Arran	78%	22%	100%
Borders	52%	48%	100%
Dumfries & Galloway	25%	75%	100%
Fife	30%	70%	100%
Forth Valley	31%	69%	100%
Grampian	83%	17%	100%
Greater Glasgow & Clyde	76%	24%	100%
Highland	20%	80%	100%
Lanarkshire	48%	52%	100%
Lothian	36%	64%	100%
Orkney	12%	88%	100%
Shetland	27%	73%	100%
Tayside	62%	38%	100%
Western Isles	1%	99%	100%
Scotland	56%	44%	100%

Note: pharmacy cases identified via 'pharmacy' clinic type for those boards that have a separate pharmacy clinic. For the others, pharmacy cases have been identified using 'intervention setting'.

Figure 7: Quit attempts made by pharmacotherapy used (Scotland, 2009)



Note: The majority of quit attempts involving NRT only (47,808 or 87%) were 'NRT – single product', whilst 6,740 (12%) were 'NRT- more than one product' and the remaining 1.0% not specified whether single product or more than one product.

Table 5. Quit numbers and rates, self-reported, at one month, by NHS board (1st Jan. to 31st Dec. 2009 quit dates)

	Quit at 1 month (self-reported - not smoked in last 2 weeks)		Smoking at 1 month (self-reported - smoked in last 2 weeks)		Lost to follow- up/smoking status unknown ¹		2008 figures - quit at 1 month		2009 total quit attempts	Successful quits in 2009 as a % of total estimated smokers (SHS, 2007/2008)
	Number	%	Number	%	Number	%	Number	%		
England ²		48%		27%		25%		50%		
NHS Board										
Ayrshire & Arran	1,341	42%	165	5%	1,655	52%	1,088	35%	3,161	1.7%
Borders	712	44%	279	17%	632	39%	538	46%	1,623	3.5%
Dumfries & Galloway	774	36%	678	32%	682	32%	668	42%	2,134	2.3%
Fife	1,445	43%	914	27%	1,027	30%	1,336	47%	3,386	1.8%
Forth Valley	1,354	42%	685	21%	1,155	36%	1,055	51%	3,194	2.1%
Grampian ³	2,286	41%	962	17%	2,331	42%	1,584	33%	5,579	2.2%
Greater Glasgow & Clyde	7,483	34%	2,545	12%	11,920	54%	5,586	33%	21,948	2.8%
Highland	1,675	46%	868	24%	1,071	30%	1,355	50%	3,614	3.0%
Lanarkshire	4,112	36%	1,753	15%	5,490	48%	3,660	47%	11,355	3.1%
Lothian	3,896	43%	1,875	21%	3,244	36%	2,320	42%	9,015	2.5%
Orkney	29	49%	6	10%	24	41%	17	38%	59	0.9%
Shetland	88	45%	57	29%	49	25%	46	48%	194	2.9%
Tayside ⁴	1,099	26%	932	22%	2,224	52%	845	28%	4,255	1.4%
Western Isles	191	52%	75	21%	99	27%	90	63%	365	3.7%
Scotland	26,485	38%	11,794	17%	31,603	45%	20,188	39%	69,882	2.5%

Notes

¹ As well as clients not able to be contacted/client non-response (and a small % of cases 'client died' or 'no consent to follow-up'), 'lost to follow-up'/unknown will include records for which 1 month follow-up data was not recorded or follow-up not undertaken.

² England – based on data for the period April to December 2009, and April to December 2008.

³ Grampian – increase in number of 1 month quits in 2008, compared with previously published 2008 figures, as result of local data cleansing exercise.

⁴ Tayside - high percentage of cases 'lost to follow-up'/unknown due to non-return of client 1 month follow-up questionnaires prior to introduction of telephone follow-ups.

Table 6. Quit numbers and rates, self-reported, at one month – pharmacy services (1st January to 31st December 2009 quit dates)

NHS Board	Quit at 1 month (self-reported - not smoked in last 2 weeks)		Smoking at 1 month (self-reported - smoked in last 2 weeks)		Lost to follow-up/smoking status unknown	
	Number	%	Number	%	Number	%
Ayrshire & Arran	788	32%	142	6%	1,521	62%
Borders	309	37%	108	13%	424	50%
Dumfries & Galloway	177	33%	200	37%	163	30%
Fife	353	34%	280	27%	399	39%
Forth Valley	352	35%	146	15%	508	50%
Grampian	1,694	37%	833	18%	2,101	45%
Greater Glasgow & Clyde	5,016	30%	1,672	10%	10,067	60%
Highland	210	29%	190	26%	327	45%
Lanarkshire	1,441	27%	627	12%	3,330	62%
Lothian	871	27%	479	15%	1,890	58%
Orkney	5	71%	1	14%	1	14%
Shetland	13	25%	18	35%	21	40%
Tayside	560	21%	574	22%	1,516	57%
Western Isles	2	50%	0	0%	2	50%
Scotland	11,791	30%	5,270	13%	22,270	57%

Notes

See notes at Table 4 and Table 5.

Table 7. Quit numbers and rates, self-reported, at one month – Non-pharmacy services (1st January to 31st December 2009 quit dates)

NHS Board	Quit at 1 month (self-reported - not smoked in last 2 weeks)		Smoking at 1 month (self-reported - smoked in last 2 weeks)		Lost to follow-up/smoking status unknown	
	Number	%	Number	%	Number	%
Ayrshire & Arran	553	78%	23	3%	134	19%
Borders	403	52%	171	22%	208	27%
Dumfries & Galloway	597	37%	478	30%	519	33%
Fife	1,092	46%	634	27%	628	27%
Forth Valley	1,002	46%	539	25%	647	30%
Grampian	592	62%	129	14%	230	24%
Greater Glasgow & Clyde	2,467	48%	873	17%	1,853	36%
Highland	1,465	51%	678	23%	744	26%
Lanarkshire	2,671	45%	1,126	19%	2,160	36%
Lothian	3,025	52%	1,396	24%	1,354	23%
Orkney	24	46%	5	10%	23	44%
Shetland	75	53%	39	27%	28	20%
Tayside	539	34%	358	22%	708	44%
Western Isles	189	52%	75	21%	97	27%
Scotland	14,694	48%	6,524	21%	9,333	31%

Notes

See notes at Table 4 and Table 5.

Table 8. Quit numbers and rates, CO validated, at one month, by NHS board area (based on 1st January to 31st December 2009 quit dates)

	Quit confirmed by CO reading? Numbers ¹			Quit confirmed by CO reading? Percentages ²		Total self- reported quit at 1 month
	Yes	No	CO Reading not taken/unknown	Yes	No	
England ³				33%		
NHS Board						
Ayrshire & Arran	1,081	8	252	34%	0%	1,341
Borders	268	26	418	17%	2%	712
Dumfries & Galloway	557	8	209	26%	0%	774
Fife	831	19	595	25%	1%	1,445
Forth Valley	813	18	523	25%	1%	1,354
Grampian	387	66	1,833	7%	1%	2,286
Greater Glasgow & Clyde	5,713	81	1,689	26%	0%	7,483
Highland	726	36	913	20%	1%	1,675
Lanarkshire	3,102	36	974	27%	0%	4,112
Lothian	1,858	70	1,968	21%	1%	3,896
Orkney	28	0	1	47%	0%	29
Shetland	31	1	56	16%	1%	88
Tayside ⁴	118	11	970	3%	0%	1,099
Western Isles ⁵	27	29	135	7%	8%	191
Scotland	15,540	409	10,536	22%	1%	26,485

Notes

¹ Numbers in this column total self-reported quits at 1 month (final column).

² Percentages are based on total quit attempts made during the year.

³ England – based on data for the period April to December 2009.

⁴ Tayside – CO validated quit information for pharmacy clients is not available centrally. Tayside pharmacy smoking cessation services routinely monitor CO readings for quit attempts and record these on client profiles held within the pharmacies.

⁵ Western Isles – Since extracting the data for the national analysis, it has been identified that cases had been incorrectly recorded as 'No' reading does not confirm quit, when they should have been recorded as 'Reading not taken'. These records have now been fixed on the national smoking cessation database.

Table 9. Quit numbers and rates, self-reported, at 1 month, by SIMD 2009 deprivation decile (1st January to 31st December 2009 quit dates)

		Quit at 1 month (self-reported - not smoked in last 2 weeks)		Smoking at 1 month (self- reported - smoked in last 2 weeks)		Lost to follow-up /smoking status unknown		2009 total quit attempts
		Number	%	Number	%	Number	%	
		SIMD 2009 Scotland	1.00	4,201	31%	2,007	15%	
level population- weighted decile	2.00	3,938	36%	1,765	16%	5,202	48%	10,905
(1=most deprived; 10=least deprived)	3.00	3,559	38%	1,651	18%	4,128	44%	9,338
	4.00	3,057	38%	1,407	18%	3,512	44%	7,976
	5.00	2,667	40%	1,216	18%	2,738	41%	6,621
	6.00	2,389	41%	1,041	18%	2,439	42%	5,869
	7.00	2,105	42%	933	19%	1,930	39%	4,968
	8.00	1,826	43%	670	16%	1,768	41%	4,264
	9.00	1,394	43%	522	16%	1,330	41%	3,246
	10.00	973	43%	385	17%	915	40%	2,273
Scotland		26,109	38%	11,597	17%	31,174	45%	68,880

Note: excludes 1,002 quit attempts where SIMD was 'unknown'.

Table 10. Quit numbers and rates, self-reported, at 1 month, by pregnant females (1st January to 31st December 2009 quit dates)

	Quit at 1 month (self- reported - not smoked in last 2 weeks)		Smoking at 1 month (self-reported - had smoked in last 2 weeks)		Lost to follow- up/smoking status unknown	
	Number	%	Number	%	Number	%
Pregnant females	568	30%	475	25%	822	44%

Table 11. Quit numbers and rates, self-reported, at 1 month, by pharmacotherapy used (1st January to 31st December 2009 quit dates)

Pharmacotherapy	Quit at 1 month (self-reported - not smoked in last 2 weeks)		Smoking at 1 month (self- reported - smoked in last 2 weeks)		Lost to follow- up/smoking status unknown		2009 total quit attempts
	Number	%	Number	%	Number	%	
NRT	19,515	35%	9,019	16%	26,700	48%	55,234
Varenicline	4,832	60%	1,181	15%	2,050	25%	8,063
None	673	44%	288	19%	552	36%	1,513
NRT + Varenicline (change in product)	166	42%	123	31%	106	27%	395
Bupropion	130	49%	59	22%	77	29%	266
NRT + Bupropion (change in product)	15	32%	16	34%	16	34%	47
Unknown	1,154	26%	1,108	25%	2,102	48%	4,364
Scotland	26,485	38%	11,794	17%	31,603	45%	69,882

Table 12. Quit numbers and rates, self-reported, at three months, by NHS board (based on 1st Jan. to 30th Sep. 2009 quit dates) *

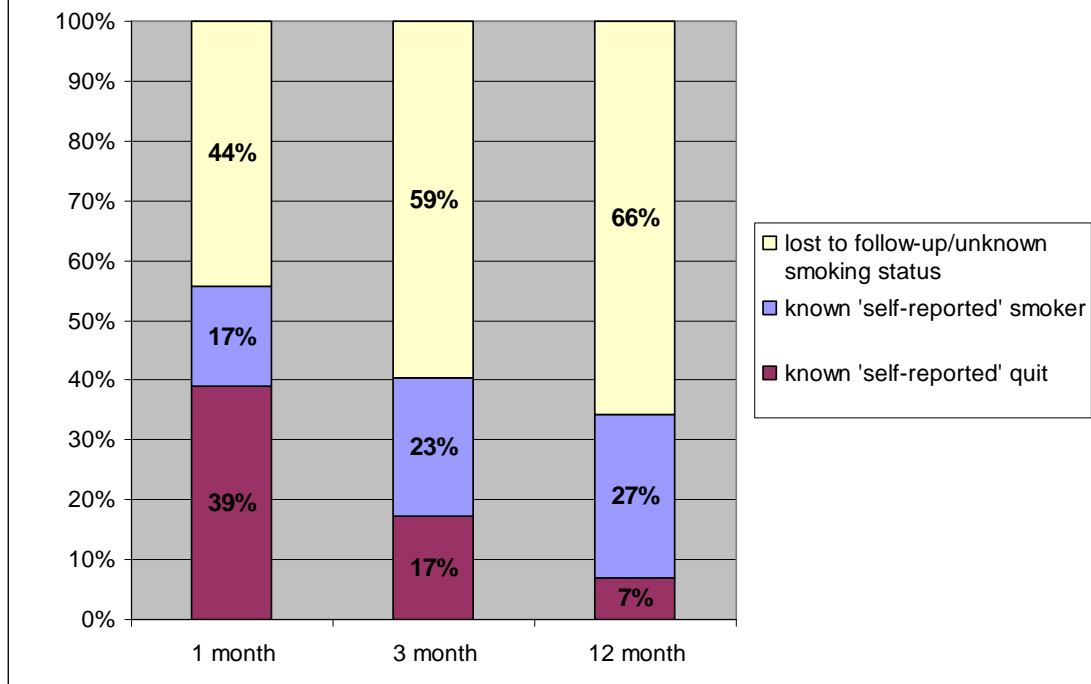
NHS Board	Not smoked since 1 month follow-up		Smoked up to 5 cigarettes		Smoked over 5 cigarettes		Lost to follow up/unknown ¹		Total quit dates set Jan to Sep 09	Self reported quit at 1 month (quit dates Jan to Sept 09)
	Number	%	Number	%	Number	%	Number	%		
Ayrshire & Arran	437	17%	30	1%	59	2%	525	20%	2,565	1,051
Borders	209	15%	25	2%	61	4%	293	22%	1,359	588
Dumfries & Galloway	306	17%	30	2%	116	7%	187	11%	1,767	639
Fife	525	19%	32	1%	158	6%	441	16%	2,719	1,156
Forth Valley	414	15%	33	1%	93	3%	626	23%	2,741	1,166
Grampian	554	12%	49	1%	60	1%	1,225	26%	4,691	1,888
Greater Glasgow & Clyde	2,286	13%	31	0%	814	5%	3,101	17%	18,034	6,232
Highland	643	21%	47	2%	104	3%	586	19%	3,035	1,380
Lanarkshire	1,461	15%	91	1%	875	9%	1,029	11%	9,635	3,456
Lothian	820	11%	83	1%	111	2%	2,060	28%	7,243	3,074
Orkney	10	20%	4	8%	1	2%	9	18%	50	24
Shetland	13	8%	7	4%	5	3%	47	30%	156	72
Tayside	463	13%	83	2%	99	3%	281	8%	3,507	926
Western Isles	59	24%	16	7%	21	9%	37	15%	241	133
Scotland	8,200	14%	561	1%	2,577	4%	10,447	18%	57,743	21,785

Notes

¹ As well as clients not able to be contacted/client non-response (and a small % of cases 'client died' or 'no consent to follow-up'), 'lost to follow-up'/unknown smoking status will include records for which 3 month follow-up data was not recorded or follow-up not undertaken (e.g. as a result of resource shortages).

* Percentages are based on a denominator of all quit dates set in the time period. Numbers are based on only clients self-reporting as not smoking at 1 month.

Figure 8: Cumulative quit outcomes at 1, 3 and 12 months after 'quit date' (Scotland, 2008)



* Percentages, at each follow-up stage, are based on a denominator of all quit dates set in the time period.

Notes

- 1 Definition of a 'self-reported' quit at 1 month is 'not smoked, even a puff, in last 2 weeks' and at 3 and 12 months 'smoked up to 5 cigarettes since 1 month follow-up'.
- 2 Re eligibility for follow-up - all quit attempts are eligible for follow-up at 1 month after quit date, at the 3 month follow-up it is just those recorded as a successful quit at 1 month, and at 12 months it is all cases recorded as a successful quit at 3 months or 'lost to follow-up'/unknown smoking status when followed up at 3 months.
- 3 In Figure 8. in last year's annual monitoring report (statistics for the 2007 calendar year) Greater Glasgow & Clyde clients no longer in service/not contactable at 1 month were assumed to have relapsed and were recorded as a smoker thus reducing the percentage of quit attempts recorded as 'lost to follow-up'/unknown smoking status.

Appendix 1

THE MINIMUM DATASET (Revised version for quit dates from 1st Jan. 2009)

For Office Use Only				
1. Client ID:				
2. Health Board area:	3. Clinic area/type:			
Client Information				
4. Date of birth: ___ / ___ / ___	5. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	6. If female, pregnant? <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unknown		
7. What is the client's ethnic group? (Choose one section from A to E, then tick one box which best describes the client's ethnic group or background):				
<p><i>A. White</i></p> <p><input type="checkbox"/> Scottish <input type="checkbox"/> English <input type="checkbox"/> Welsh <input type="checkbox"/> Northern Irish <input type="checkbox"/> British <input type="checkbox"/> Irish <input type="checkbox"/> Gypsy/Traveller <input type="checkbox"/> Polish <input type="checkbox"/> Any other white ethnic group, please specify</p> <p>_____</p>	<p><i>B. Mixed or multiple ethnic groups</i></p> <p><input type="checkbox"/> Any mixed or multiple ethnic groups, please specify</p> <p>_____</p>	<p><i>C. Asian, Asian Scottish or Asian British</i></p> <p><input type="checkbox"/> Pakistani, Pakistani Scottish or Pakistani British <input type="checkbox"/> Indian, Indian Scottish or Indian British <input type="checkbox"/> Bangladeshi, Bangladeshi Scottish or Bangladeshi British <input type="checkbox"/> Chinese, Chinese Scottish or Chinese British <input type="checkbox"/> Other, please specify</p> <p>_____</p>	<p><i>D. African, Caribbean or Black</i></p> <p><input type="checkbox"/> African, African Scottish or African British <input type="checkbox"/> Caribbean, Caribbean Scottish or Caribbean British <input type="checkbox"/> Black, Black Scottish or Black British <input type="checkbox"/> Other, please specify</p> <p>_____</p>	
<p><i>E. Other ethnic group</i></p> <p><input type="checkbox"/> Arab <input type="checkbox"/> Other, please specify</p> <p>_____</p> <p style="text-align: right;"><input type="checkbox"/> Not Disclosed</p>				
8. Does the client receive free prescriptions? <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unknown				
9. Employment status (please tick one box)				
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> In paid employment <input type="checkbox"/> Homemaker/full-time parent or carer <input type="checkbox"/> Retired <input type="checkbox"/> Not known/missing <input type="checkbox"/> Other (please specify) _____ </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Full-time student <input type="checkbox"/> Unemployed <input type="checkbox"/> Permanently sick or disabled </td> </tr> </table>			<input type="checkbox"/> In paid employment <input type="checkbox"/> Homemaker/full-time parent or carer <input type="checkbox"/> Retired <input type="checkbox"/> Not known/missing <input type="checkbox"/> Other (please specify) _____	<input type="checkbox"/> Full-time student <input type="checkbox"/> Unemployed <input type="checkbox"/> Permanently sick or disabled
<input type="checkbox"/> In paid employment <input type="checkbox"/> Homemaker/full-time parent or carer <input type="checkbox"/> Retired <input type="checkbox"/> Not known/missing <input type="checkbox"/> Other (please specify) _____	<input type="checkbox"/> Full-time student <input type="checkbox"/> Unemployed <input type="checkbox"/> Permanently sick or disabled			
10. Full postcode:				

Tobacco Use and Quit Attempts		
11. On average, how many cigarettes does the client usually smoke per day? <input type="checkbox"/> 10 or less <input type="checkbox"/> 11-20 <input type="checkbox"/> 21-30 <input type="checkbox"/> More than 30 <input type="checkbox"/> Unknown	12. How soon after waking does the client usually smoke their first cigarette? <input type="checkbox"/> Within 5 minutes <input type="checkbox"/> 6-30 minutes <input type="checkbox"/> 31-60 minutes <input type="checkbox"/> After 60 minutes <input type="checkbox"/> Unknown	13. How many times has the client tried to quit smoking in the past year? <input type="checkbox"/> No quit attempts <input type="checkbox"/> Once <input type="checkbox"/> 2 or 3 times <input type="checkbox"/> 4 or more times <input type="checkbox"/> Unknown
Intervention Details		
14. Date referred to service: ___ / ___ / ___	15. Quit date: ___ / ___ / ___	16. Date of initial appointment: ___ / ___ / ___
17. Does the client consent to follow-up? <input type="checkbox"/> Yes <input type="checkbox"/> No		
18. Pharmaceutical usage <input type="checkbox"/> NRT only (single product) <input type="checkbox"/> NRT only (more than one product) <input type="checkbox"/> Varenicline only <input type="checkbox"/> Bupropion only <input type="checkbox"/> NRT and Varenicline (change in product) <input type="checkbox"/> NRT and Bupropion (change in product) <input type="checkbox"/> None <input type="checkbox"/> Unknown Total number of weeks used _____		
19. Intervention(s) used in this quit attempt <input type="checkbox"/> One to one sessions <input type="checkbox"/> Group support (closed groups) <input type="checkbox"/> Telephone support <input type="checkbox"/> Group support (open/rolling groups) <input type="checkbox"/> Couple/family based support <input type="checkbox"/> Other (please specify) _____ <input type="checkbox"/> Unknown		
20. Intervention setting(s) <input type="checkbox"/> Primary Care <input type="checkbox"/> Hospital - Inpatient <input type="checkbox"/> Hospital - Outpatient <input type="checkbox"/> Pharmacy <input type="checkbox"/> Prison <input type="checkbox"/> Workplace <input type="checkbox"/> Educational establishment <input type="checkbox"/> Non-NHS community venue <input type="checkbox"/> Home <input type="checkbox"/> Other (please specify) _____		
1-Month Follow-Up		
21. Was the client successfully contacted for 1-month follow-up? <input type="checkbox"/> Yes <input type="checkbox"/> No (Client lost to follow up) <input type="checkbox"/> No (Client did not consent to follow up) <input type="checkbox"/> No (Client died) <input type="checkbox"/> Unknown		
22. Date follow-up carried out: ___ / ___ / ___		

Appendix 2.

Definition of services to be included in the national minimum dataset monitoring in Scotland

'A specialist service is an NHS supported service with staff who have nationally recognised training and dedicated time for group and 1-1 support for a series of planned sessions where the client is followed up at 1 month, 3 months and 1 year post quit date and the data is recorded.'

This definition is intended to reflect services as they are currently set up in Scotland. It is noted that a substantial proportion of services have been set up in recent years and are in the early stages of development. It is therefore expected that this definition will change over time as services become established and further evidence becomes available

Definition	Explanation of terms/rationale
A specialist service is	A service which is in some way dedicated (which can be for short or longer sessions) provided by specially trained staff
an NHS supported service	This would normally mean funded by the NHS, but leaves room for services trained by the NHS or working to the same levels to be included- e.g. workplace or prisons
with staff who have nationally recognised training and dedicated time	Nationally recognised would mean PATH modules, local training approved by PATH or Maudsley courses. Training should meet the criteria in 'Guidance for Health Behaviour Change Training' and should reach or be designed to reach national standards in Scotland. Update should have taken place within the last 5 years.
for group and 1-1 support	Evidence and current guidelines support group work, and 1-1 where desirable and because of geographical constraints.
for a series of planned sessions	This would normally be a minimum of 4, usually around 7 sessions where the first and last would generally last at least 20 minutes. This will exclude opportunistic and brief advice work, but allow expert practitioners (the staff defined above with regards to training and time) to use personal judgement
where the client is followed up at 1 month 3 months and 1 year post quit date and the data is recorded	This should include CO validation at 1 month.

Supplementary Tables - NHS Board Breakdowns

Table A. Quit attempts made – pregnant females (NHS boards, 2009)

NHS Board	Number of quit attempts made by pregnant women (2009)	Number of women smoking in pregnancy (SMR02, 2008 ^p)	Estimated % of pregnant smokers attempting to quit using NHS cessation services (2009) ¹
Ayrshire & Arran	51	1,026	5%
Borders	34	250	14%
Dumfries & Galloway	49	343	14%
Fife	158	994	16%
Forth Valley	30	722	4%
Grampian	122	1,222	10%
Greater Glasgow & Clyde	565	1,984	28%
Highland	114	624	18%
Lanarkshire	256	1,134	23%
Lothian	274	1,378	20%
Orkney	2	35	6%
Shetland	4	32	13%
Tayside	192	944	20%
Western Isles	14	13	108%
Other ²		32	
Scotland	1,865	10,733	17%

Notes

¹ The estimated 17% of pregnant smokers attempting to quit using NHS cessation services, in Scotland in 2009, is based on: quit attempts made in the 2009 calendar year and the latest available estimate of the number of women smoking in pregnancy. Note: the latter is based on the 2008 calendar year and so the figures given in the last column are intended as a guide only. See also footnote 5. on page 5. for warnings regarding SMR02 data quality and completeness.

² Includes births where NHS board of residence is unknown or outside Scotland.

Table B. Number of quit attempts made by SIMD 2009 deprivation decile (NHS boards, 2009)

		Ayrshire & Arran	Borders	Dumfries & Galloway	Fife	Forth Valley	Grampian	Greater Glasgow & Clyde	Highland	Lanark shire	Lothian	Orkney	Shetland	Tayside	Western Isles
SIMD 2009 deciles for Scotland (1 = most deprived 10 = least deprived)	1.00	564	89	164	396	331	374	7767	254	1705	1035	0	0	741	0
	2.00	690	80	157	654	468	513	3961	321	2346	1168	0	1	546	0
	3.00	547	111	239	521	612	602	2383	399	1985	1357	0	1	555	26
	4.00	482	201	381	424	405	495	1857	428	1504	1109	12	34	457	187
	5.00	209	288	350	300	334	661	1399	552	1208	875	8	33	313	91
	6.00	203	248	263	376	208	649	1265	481	906	742	15	57	419	37
	7.00	114	296	315	166	294	566	754	478	653	796	22	38	476	0
	8.00	176	219	181	197	231	681	1054	278	357	544	0	2	344	0
	9.00	131	32	69	245	171	563	786	134	389	497	1	2	226	0
	10.00	33	23	10	93	90	469	559	35	165	694	0	0	102	0
	Unknown	12	36	5	14	50	6	163	254	137	198	1	26	76	24
Total		3161	1623	2134	3386	3194	5579	21948	3614	11355	9015	59	194	4255	365

Table C. Percentage of quit attempts made by SIMD 2009 deprivation decile (NHS boards, 2009)

SIMD 2009 deciles for Scotland	NHS boards													
	Ayrshire & Arran	Borders	Dumfries & Galloway	Fife	Forth Valley	Grampian	Greater Glasgow & Clyde	Highland	Lanarkshire	Lothian	Orkney	Shetland	Tayside	Western Isles
1.00	18%	5%	8%	12%	10%	7%	35%	7%	15%	11%	0%	0%	17%	0%
2.00	22%	5%	7%	19%	15%	9%	18%	9%	21%	13%	0%	1%	13%	0%
3.00	17%	7%	11%	15%	19%	11%	11%	11%	17%	15%	0%	1%	13%	7%
4.00	15%	12%	18%	13%	13%	9%	8%	12%	13%	12%	20%	18%	11%	51%
5.00	7%	18%	16%	9%	10%	12%	6%	15%	11%	10%	14%	17%	7%	25%
6.00	6%	15%	12%	11%	7%	12%	6%	13%	8%	8%	25%	29%	10%	10%
7.00	4%	18%	15%	5%	9%	10%	3%	13%	6%	9%	37%	20%	11%	0%
8.00	6%	13%	8%	6%	7%	12%	5%	8%	3%	6%	0%	1%	8%	0%
9.00	4%	2%	3%	7%	5%	10%	4%	4%	3%	6%	2%	1%	5%	0%
10.00	1%	1%	0%	3%	3%	8%	3%	1%	1%	8%	0%	0%	2%	0%
Unknown	0%	2%	0%	0%	2%	0%	1%	7%	1%	2%	2%	13%	2%	7%
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Table D. Percentage of quit attempts made by pharmacotherapy used (NHS boards, 2009)

NHS Board	NRT	Varenicline	Bupropion	NRT + Varenicline (change in product)	NRT + Bupropion (change in product)	None	Unknown	Total NHS Board
Ayrshire & Arran	86%	11%	0%	1%	0%	1%	1%	100%
Borders	82%	7%	0%	1%	0%	1%	9%	100%
Dumfries & Galloway	55%	17%	0%	3%	0%	3%	21%	100%
Fife	68%	24%	0%	1%	0%	2%	4%	100%
Forth Valley	66%	21%	1%	2%	0%	3%	7%	100%
Grampian	87%	10%	1%	0%	0%	2%	1%	100%
Greater Glasgow & Clyde	87%	11%	0%	0%	0%	1%	0%	100%
Highland	71%	10%	1%	0%	0%	2%	16%	100%
Lanarkshire	95%	4%	0%	0%	0%	1%	0%	100%
Lothian	72%	16%	1%	0%	0%	5%	5%	100%
Orkney	75%	10%	5%	0%	0%	7%	3%	100%
Shetland	64%	7%	0%	1%	0%	1%	28%	100%
Tayside ¹	33%	11%	0%	1%	0%	8%	48%	100%
Western Isles	84%	3%	0%	1%	1%	6%	4%	100%
Scotland	79%	12%	0%	1%	0%	2%	6%	100%

¹ Tayside - missing information on pharmacotherapy use has led to an under-recording of the numbers of clients using pharmacological support for their quit attempt.

Table E. Quit numbers and rates, self-reported, at 1 month, by CHP/CHCP¹ (1st Jan. to 31st Dec. 2009 quit dates)

CHP/CHCP	Quit at 1 month (self-reported - not smoked in last 2 weeks)		Smoking at 1 month (self- reported - smoked in last 2 weeks)		Lost to follow- up/smoking status unknown		2009 total quit attempts	Successful quits, in 2009, as a % of total estimated smokers (SHS, 2007/2008) ²
	Number	%	Number	%	Number	%		
Aberdeen City Community Health Partnership	978	40%	446	18%	1,009	41%	2,433	2.2%
Aberdeenshire Community Health Partnership	1,069	43%	396	16%	1,041	42%	2,506	2.8%
Angus Community Health Partnership	403	29%	289	21%	685	50%	1,377	1.9%
Argyll & Bute Community Health Partnership	329	36%	290	32%	292	32%	911	2.1%
Clackmannanshire Community Health Partnership	331	48%	121	17%	240	35%	692	2.7%
Dumfries & Galloway Community Health Partnership	770	36%	682	32%	679	32%	2,131	2.3%
Dundee City Community Health Partnership	411	23%	382	22%	970	55%	1,763	1.3%
Dunfermline & West Fife Community Health Partnership	807	40%	426	21%	780	39%	2,013	3.2%
East Ayrshire Community Health Partnership	496	48%	67	6%	480	46%	1,043	2.0%
East Dunbartonshire Community Health Partnership	481	37%	186	14%	638	49%	1,305	3.4%
East Glasgow Community Health & Care Partnership	857	27%	356	11%	1,904	61%	3,117	2.6%
East Lothian Community Health Partnership	303	38%	137	17%	358	45%	798	2.0%
East Renfrewshire Community Health & Care Partnership	351	41%	101	12%	408	47%	860	2.6%
Edinburgh Community Health Partnership	1,826	42%	949	22%	1,605	37%	4,380	2.2%
Falkirk Community Health Partnership	694	43%	393	24%	522	32%	1,609	1.9%
Glenrothes & North East Fife Community Health Partnership	189	44%	92	21%	151	35%	432	0.7%
Inverclyde Community Health Partnership	520	39%	175	13%	634	48%	1,329	3.2%
Kirkcaldy & Levenmouth Community Health Partnership	471	46%	410	40%	136	13%	1,017	2.1%
Mid Highland Community Health Partnership	441	60%	98	13%	193	26%	732	1.9%
Midlothian Community Health Partnership	555	46%	288	24%	360	30%	1,203	3.0%
Moray Community Health Partnership	230	36%	121	19%	280	44%	631	1.2%
North Ayrshire Community Health Partnership	603	42%	64	4%	763	53%	1,430	1.7%
North Glasgow Community Health & Care Partnership	576	30%	251	13%	1,076	57%	1,903	2.2%
North Highland Community Health Partnership	189	46%	145	35%	75	18%	409	2.8%

North Lanarkshire Community Health Partnership	2,538	36%	1,186	17%	3,416	48%	7,140	3.2%
Orkney Community Health Partnership	30	50%	6	10%	24	40%	60	1.0%
Perth & Kinross Community Health Partnership	285	26%	259	24%	544	50%	1,088	1.1%
Renfrewshire Community Health Partnership	1,140	41%	286	10%	1,373	49%	2,799	3.3%
Scottish Borders Community Health Partnership	722	45%	274	17%	620	38%	1,616	3.6%
Shetland Community Health Partnership	76	45%	52	31%	41	24%	169	2.5%
South Ayrshire Community Health Partnership	261	35%	43	6%	441	59%	745	1.4%
South East Glasgow Community Health & Care Partnership	619	32%	229	12%	1,071	56%	1,919	2.3%
South East Highland Community Health Partnership	616	46%	278	21%	447	33%	1,341	3.5%
South Lanarkshire Community Health Partnership	2,129	37%	700	12%	2,920	51%	5,749	3.2%
South West Glasgow Community Health & Care Partnership	908	32%	337	12%	1,574	56%	2,819	2.8%
Stirling Community Health Partnership	338	38%	171	19%	385	43%	894	2.0%
West Dunbartonshire Community Health Partnership	571	34%	187	11%	917	55%	1,675	2.8%
West Glasgow Community Health & Care Partnership	796	34%	255	11%	1,324	56%	2,375	2.1%
West Lothian Community Health & Care Partnership	1,061	47%	409	18%	797	35%	2,267	3.0%
Western Isles Community Health Partnership	177	52%	73	21%	93	27%	343	3.4%
Unknown	338	39%	184	21%	337	39%	859	
Scotland	26,485	38%	11,794	17%	31,603	45%	69,882	2.5%

Notes

¹ Figures are based on the client's area of residence.

² Care should be taken with interpretation for the smaller areas as sample sizes will be small.