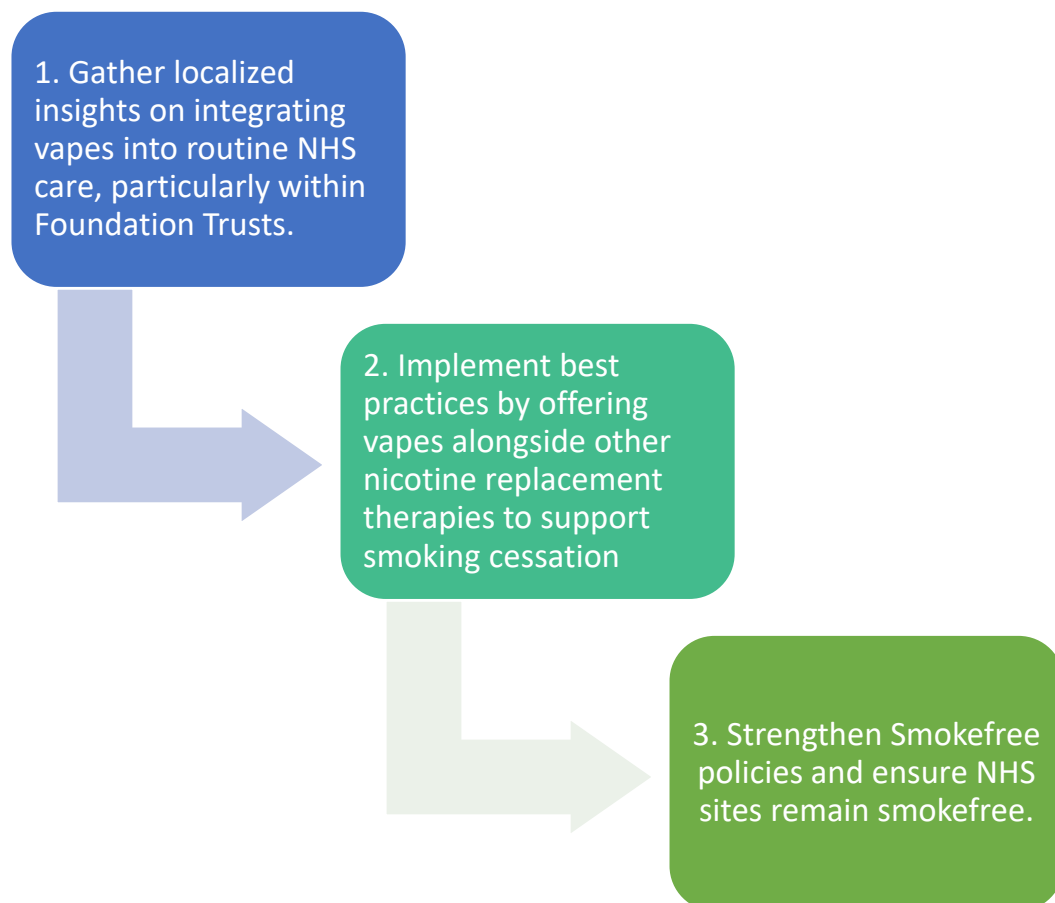


A Report for Smokefree NHS Taskforce on NENC ICS Vape Pilot

Background

In December 2023, the North East and North Cumbria (NENC) Smokefree NHS / Treating Tobacco Dependency Taskforce identified an opportunity to allocate underspend from the 2023/24 budget to pilot small-scale vape interventions within NHS Foundation Trust (FT) settings.

The primary objectives of the pilot were to:



Additionally, participating Trusts were required to collaborate with local authorities to explore opportunities for engagement in the national "Swap to Stop" scheme to support long-term sustainability.

An Expression of Interest (EOI) was circulated to all NENC Foundation Trusts, and four Trusts responded: **County Durham and Darlington NHS FT (CDDFT)**, **Cumbria Northumberland Tyne and Wear NHS FT (CNTW)**, Newcastle Upon Tyne Hospitals NHS FT (NUTH), and **South Tees Hospitals NHS FT** (South Tees).

The Pilot

The pilot lasted for 6 months and ran from 1st of April till the 30th of September 2024. In total, vape kits were made available to participating Trusts through a local supplier Vape Dinner Lady for the pilot. There were three selected pathways for implementation:

- Acute care (CDDFT)
- Maternity services (NUTH, South Tees)
- Staff support (CNTW)

The maternity pathway was the most commonly chosen intervention among the Trusts.

The pilot had staggered start dates, and uptake varied across Trusts. By the end of the pilot, approximately **300** vape kits had been dispensed across all sites. Monthly meetings were held to track progress, using a standardized data capture form for consistency. There were **44** quits recorded during the pilot period , it is important to note that the primary objective for this pilot was to support Trusts to adopt vapes into existing NHS Long Term pathways.

Each Trust utilised internal data collection tools to assess the pilot's reach and impact, with most relying on Microsoft Excel spreadsheets, while some incorporated specialized systems.

Pilot Themes and Challenges

The participating Trusts encountered several challenges and a number of common themes emerged during the pilot:



- **Health and Safety Considerations:** at the start of pilot there were initial concerns around vape charging and ensuring equitable access to necessary accessories.
- **Training and Awareness:** during the pilot it was found that additional training for staff improved vape distribution rates, and efforts were made by teams to integrate vaping-related education into other staff training programs.
- **Engagement and Retention:** Sustaining participation was challenging. Digital cessation tools, such as the Smokefree app, were suggested to be used to enhance accessibility and continued engagement.
- **Product Popularity:** Nicotine salts utilised were well-received, leading to increased uptake and engagement. Fruity options such as Blueberry Lemonade, Strawberry Watermelon, and Kiwi were the most popular, while Tobacco, Menthol, and Spearmint Menthol were preferred by older women. During the pilot when occasional shortages of fruity flavours occurred , participants were observed independently purchasing fruit-flavoured liquids/salts
- **Operational Challenges:** There were occasional issues with device malfunctions, pod leakage, and liquid-induced irritation which required ongoing attention and mitigation. The participating Trusts offered each other peer support to address these issues over time but also were able to contact the vape supplier for replacement when needed.

- **Smoking Cessation Impact:** The provision of vapes enhanced patient engagement and demonstrated the potential for improved quit rates, particularly among those who had previously struggled with nicotine replacement therapies alone.
- **Integration into Nicotine Replacement Therapy (NRT) budgets:** Many Trusts started to incorporate/consider vapes as part of their standard treatment and viewed them as a cost-effective smoking cessation measure
- **Collaboration with Local Authorities:** Several Trusts engaged with local public health teams to secure long-term vape supplies and align with national programs like "Swap to Stop."
- **Expansion Plans:** Some Trusts explored extending vape provision to additional sites and services.

Recommendations

1. Integration of Vapes in Tobacco Dependency Pathways

- Expand vape provision within all Tobacco Dependency Treatment pathways/services, particularly in inpatient acute, maternity, and in-patient mental health settings.
- Ensure equitable access to vapes, charging accessories, and psychosocial support to prevent health inequalities in uptake and outcomes.

2. Enhanced Training for Frontline Staff

- Develop standardised training modules on vape usage, patient education, and data collection for staff, especially Tobacco Dependency Advisors.
- Deliver awareness sessions to address misconceptions about vaping and its role in smoking cessation & use reliable resources e.g. NENC vaping leaflets.

3. Improved Data Collection and Evaluation

- Improve data collection by recording and reporting, and where possible use consistent data collection tools to allow for comparative analysis.
- Track CO readings, quit rates, and patient feedback to assess long-term effectiveness.

4. Addressing Operational Challenges

- Establish clear quality assurance processes with vape suppliers to address issues such as pod leakage and liquid irritation quickly.
- Improve retention using digital support, personalized follow-ups where possible. Integrate digital tools, such as the Smokefree app, to provide virtual support, track progress, and enhance patient engagement.

5. Targeted Support for Vulnerable Populations

- Provide tailored interventions for high-risk groups, such as pregnant individuals and people with severe mental health illness.
- Involve partners and family members in cessation programs to create a supportive environment.

6. Sustainability

- Strengthen collaboration between NHS Trusts and local authorities to ensure continued access to resources like the funded "Swap to Stop" scheme.
- Advocate for the long-term inclusion of vapes in NHS budgets as a cost-effective smoking cessation tool.

7. Public Awareness and Communication

- Provide clear, evidence-based information to counteract misconceptions about vaping such as NENC vaping leaflets.

8. Reinforce Smokefree Site Policies

- Encourage the promotion of vaping as a harm-reduction tool across all NENC NHS Trust sites for patients, visitors, and staff and beyond
- Offer vape kits to individuals found smoking on-site as a harm-reduction measure and smoking cessation support.

9. Stakeholder Engagement

- Engage healthcare professionals, patients, and community organizations in co-designing interventions.
- Establish continuous feedback mechanisms to improve interventions based on participant experiences and using robust available reliable evidence.

Conclusion

The NENC Smokefree NHS Vape Pilot provided valuable insights into the opportunities to integrate vapes as part of NHS Long Term Plan pathways. Despite operational challenges such as device issues and patient dropouts, the pilot was overall received positively.

The pilot provided useful information and demonstrated the feasibility of incorporating vapes into routine secondary care and opportunities to scale up access to larger number vapes across the NENC ICS footprint and supports the ADPHNE position statement on supporting smokers to quit. Since the pilot **9/10** Trusts now have an offer of vapes as part of their NHS LTP pathway with the remaining making plans to incorporate vapes shortly

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