**Support to Stop Smoking Agreement**

Well done you have chosen the best way to stop smoking by using our service which provides behavioural support and medication, free of charge to smokers who want to quit. This involves discussing the best type of products to use, ways to help cope with difficult situations and providing ongoing support for up to 3 months.

If you do not pay for prescriptions then the stop smoking products are free of charge. If you do pay; it will just be one charge per item per prescription. (This does not include Electronic cigarettes, which can be used but only if purchased by you)

In order for the service to be effective serious commitment is required both from the advisor and the smoker. Please read together and sign your agreement

The advisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has explained

\*The importance of stopping smoking & the ‘not a puff rule’

\* The importance of taking a CO reading

\*The products that can be used to help with cravings and withdrawal symptoms and how to use them

\* This is a 12 week (3month) course and they will provide support and access to products for this period of time

The client \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_agrees to

\* Attend regularly (weekly initially then fortnightly) and take CO reading.

\* Set a quit date, and after this date, agree to not have a single puff of tobacco.

\* Use the products instead of smoking.

\* If I do smoke after my quit date, I will discuss with my advisor what made me pick up a cigarette and what I can do next time I ‘feel like one’ and will be given a another chance.

\*If I continue to smoke I understand that my advisor will not be able to support me but I will be offered a referral into the Specialist Service where other options may be available.

\* If I am still using products after 12 weeks, I will purchase my own supply (except in exceptional circumstances).

Date Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Advisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Client\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_