



Sandwell Stop Smoking Service **Application for Training**

To book a place on one of our free training sessions please complete and return this application form to the address overleaf.

Surname..... Designation.....
First name.....
Address/Workplace..... PCT/Organisation.....
.....
Phone.....

**If you wish to apply for one of the 3 following training sessions
Please tick the appropriate box**

Raising the Issue of Smoking

½ day training session

This training will equip you with,

- The skills to raise the issue of smoking with your patients/clients
- A brief overview of what services are available for smokers locally
- Information on how to refer to GP/Specialist services
- Available drug treatments

Smoking Cessation Interventions for Health Professionals

1 day theoretical training, plus 4 practical sessions visiting groups and clinics to observe a specialist advisor. (Lunch provided)

This training will equip you with,

- The skills to run a stop smoking group or clinic for your patients/clients
- How to motivate and support smokers wishing to quit
- Understanding of nicotine addiction
- How to undertake carbon monoxide testing
- How to supply/prescribe nicotine replacement products

Smoking Cessation Interventions for Non-Health Professionals

2-½ day theoretical training, plus 4 practical sessions visiting groups and clinics to observe a specialist advisor. (Lunch provided)

This training will equip you with,

- The skills to run a stop smoking group or clinic for your patients/clients
- How to motivate and support smokers wishing to quit
- How to undertake carbon monoxide testing
- How to supply a limited range of nicotine replacement products
- How to provide interventions within ethnic communities
- How to provide interventions for young people

My employer has agreed that I may provide a smoking cessation group or clinic within my area of work/community (not applicable for raising the issue training)

Employers/Manager Signature.....

Designation.....

I agree that I have the capacity to provide a smoking cessation group or clinic within my area of work/community (not applicable for raising the issue training)

Applicants Signature.....

Designation.....

For further information telephone: 0121-607-3337

Please return this completed form to

SANDWELL STOP SMOKING SERVICE
2nd Floor, Victoria House
290/292 High Street,
West Bromwich,
B70 8EN