

UCL RESEARCH DEPARTMENT OF PRIMARY CARE
AND POPULATION HEALTH



UCL



start2quit

SMOKING QUESTIONNAIRE

in collaboration with



THE UNIVERSITY *of York*

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Office use only

Instructions:

This questionnaire contains questions about yourself, your smoking history, your health, and how you feel about smoking and quitting. It will help us to understand the needs of smokers from all backgrounds.

All the information you give is completely confidential. This means that your answers will be treated as private and you will not be identified by the answers you give. The data will be kept separate from your personal details.

Please:

- 1) Make sure you complete and sign the consent form and patient details section.
- 2) Complete the questionnaire by placing a cross in the box (e.g.) that represents your answer. If you make a mistake please shade in the entire box (e.g.) and then place a cross in the box that represents your answer.
- 3) Return the completed booklet to your surgery in the FREEPOST envelope provided. You do not need a stamp.
- 4) If you would prefer not to take part in this study, please fill out patient details and complete Section A to update your medical records and return the entire questionnaire as detailed above. If you'd like to add any further information regarding your smoking status, please use the comment box on the last page of the questionnaire.

Start2Quit Study Consent Form

Please place your initials in the box (eg. **AE**) and sign below.

1. I agree to participate in the Start2Quit study.
2. I confirm that I have read the Information Sheet (version 2 dated 25/03/2010).
3. I understand that I am free to drop out at any time without giving a reason, and that my medical care will not be affected.
4. I understand that my GP practice will be informed of my participation but the details I give are completely confidential and will not be passed on to anyone outside the research team.
5. I understand that relevant sections of my medical notes and data collected during the study, may be looked at by individuals from UCL, from regulatory authorities or from the NHS Trust, where it is relevant to my taking part in the research. I give permission for these individuals to have access to my records.
6. I understand that information from my medical records and from my answers in the questionnaire may be used to send me information about quitting.
7. I understand that relevant data from my attendance at the NHS services will be released to the researchers.

Signature

Date

OR

I am willing to complete the questionnaire but do not wish to participate further in this research.



Section B: These questions are about your smoking and how you feel about smoking and quitting

1) How old were you when you first smoked cigarettes regularly? years

2) How soon after waking do you normally have your first cigarette of the day? within 5 mins
 6 - 30 mins
 31 - 60 mins
 1 - 2 hours
 longer than 2 hours

3) What is the longest you have ever quit smoking for? less than 24 hours
 1 - 6 days
 1 - 4 weeks
 longer than 1 month

4) Are you seriously thinking of quitting: within the next 2 weeks
 within the next 30 days
 within the next 6 months
 not within the next 6 months

5) If you are not planning to quit, is it because: it is too difficult
 you want to smoke

6) Would you think of quitting if appropriate help were offered at a convenient time and place? yes
 no

Section B: cont...

7) Have you ever attended a NHS Stop Smoking Service run by a smoking cessation advisor, a practice nurse or a pharmacist? no
 I tried but was unable to make an appointment
 yes

If yes, when did you attend? Less than 12 months ago
 1 - 2 years ago
 3 - 5 years ago
 More than 5 years ago

Questions 8-10 have the same responses. Please answer by placing a in the box which best describes how you currently feel.

	Not at all	A little	Moderately	Very much	Extremely
8) How much do you want to quit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9) How determined are you to quit for good?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10) How confident are you that you can quit for good?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Section C: These questions refer to your use of services and smoking cessation help in the last 6 months.

/ /

Section C: cont...

1) In the last six months how many times have you:
Please write in number (place a zero in the box if there have been no events in the category).

a) Sought help or advice to quit smoking from your GP?

b) Sought help or advice to quit smoking from your Practice Nurse?

c) Sought help or advice to quit smoking from a pharmacist?

d) Rung up the NHS Smoking Helpline service for advice or support?

e) Rung up any other smoking helpline e.g. Quitline for advice or support?

f) Used an Internet site for help and support?

2a) In the last six months have you used Nicotine Replacement Therapy (NRT) products to help you to quit smoking? yes no

b) If yes, for how long did you use these products? less than 24 hours 24 hours 1 - 6 days 7 - 13 days 2 - 4 weeks longer than 1 month

3) How much have you spent purchasing additional products to help you stop smoking over the previous six months, excluding NRT on prescription?

- nothing
- £1 - £10
- £11 - £20
- £21 - £30
- £31 - £40
- £41 - £50
- £51 - £100
- over £101



Section D: cont...

10) What is your highest qualification?

- no qualifications
- GCSE/CSE/O Level
- A Level
- Degree or equivalent
- Postgraduate degree

11) Are you now:

- unemployed
- in paid employment
- fulltime student
- housewife/husband
- retired
- disabled/too ill to work

12) Is or was your main occupation:

- manual
- non-manual

13) What is your ethnic background?

- white
- black
- asian
- other

Thank you for completing the questionnaire.

If you have agreed to participate in the research, we would like to thank you for taking part. You will receive another communication shortly and you will be contacted again by telephone to complete a follow-up questionnaire in six months time.

If you do not wish to participate, we will not contact you again.

