

Report to:	EXECUTIVE CABINET
Date:	27 March 2024
Executive Member:	Cllr Eleanor Wills – Executive Member (Population Health & Wellbeing)
Reporting Officer:	Debbie Watson, Director of Public Health
Subject:	MAKE SMOKING HISTORY IN TAMESIDE: THE TOBACCO CONTROL PLAN FOR 2024-2029
Report Summary:	<p>This report provides an update on the development of the tobacco control plan ‘Make Smoking History in Tameside’. The plan aligns to the developing Healthy Places strategic framework and supports the newly adopted ‘<i>Building Back Fairer, Stronger, Together</i>’ Health and Wellbeing Strategy and Locality Plan, setting out six strategic objectives to enable a systems approach to tackling tobacco use in Tameside.</p> <p>The report also provides an overview of the recently announced grant funding for local authorities to boost stop smoking services as part of the ‘Stopping the start: our new plan to create a smokefree generation’ policy paper, together with commissioning intentions from 24/25.</p>
Recommendations:	<p>That Executive Cabinet be recommended to:</p> <ul style="list-style-type: none"> (i) Note and accept the Section 31 grant funding for ‘Local stop smoking services and support’ for the period 2024/29, noting the 2024/25 allocation of £0.413m to enhance local stop smoking services and support in Tameside. (ii) Note and agree the Tameside model for tobacco control described in section 3 of the report. (iii) Approve the commissioning intentions for the grant funding and the proposed delivery plan as outlined in Section 5 of the report.
Corporate Plan:	The priority areas in the Tobacco-free Plan are wide reaching as there is significant impact of tobacco use across the life course and across several areas of the Corporate Plan particularly Very Best Start in Life; Nurturing our Communities; Longer and Healthier Lives with Good Mental Health; and Independence and Activity in Older Age, and Dignity and Choice.
Policy Implications:	The Tobacco-free Plan advocates for the creation of a system which seeks to make smoking history in Tameside. The Tameside Tobacco-free plan aligns with the national Stopping the Start strategy and the regional Greater Manchester Making Smoking History which all 10 local authorities and the Integrated Care Board have committed to delivery in their respective localities. As part of this system change a review of all policies will be required to embed a health in all policies approach wherever possible.
Financial Implications: (Authorised by the statutory Section 151 Officer)	The report is requesting acceptance of the Section 31 grant funding for ‘Local stop smoking services and support’ from the Department of Health and Social Care. The funding period for the grant has been

announced between 2024/25 and 2028/29. The confirmed funding amount for 2024/25 is £0.413m.

While the grant has been confirmed until 2028/29 no further confirmation has been received on funding amounts beyond 2024/25. The service needs to take this into account when commissioning services and, as per standard procurement practice, included appropriate break clauses within the contract arrangements. This will ensure that the commissioned services can be altered or withdrawn in the event that the grant ceases or reduces to mitigate any adverse financial impact on the Council.

Any commissioned services detailed in section 5.1 of the report will need to go through the appropriate procurement route to ensure that the council are receiving best value for money.

Any uplift in commissioned contract values due to inflation or other reasons would need to be considered when commissioning contracts and ensure that there is sufficient funding available within the amount stated in point 4.1 of the report.

**Legal Implications:
(Authorised by the
Borough Solicitor)**

The grant funding referenced in the report is awarded pursuant to Section 31 of the Local Government Act 2003 and where conditions of the grant are imposed it is a legal requirement that the Authority complies with such conditions. The report provides detail of the proposed lawful use of the funding to enable acceptance, for the utilisation of the grant funding and the criteria for the award. It is noted from the report that further criteria will be published by Central Government before 1 April 2024, and such will inform the final delivery plan for 2024-25.

Risk Management:

The programme described in the paper delivers on the grant conditions outlined in the 'Local stop smoking services and support' Section 31 grant funding. Risks to the effective delivery of the Tameside tobacco-free plan are identified, managed and mitigated by the Tameside Tobacco-free Partnership which reports to the Health and Wellbeing Board.

Background Information:

The background papers relating to this report can be inspected by contacting Beth Wolfenden, Head of Public Health Programmes



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1. INTRODUCTION

- 1.1 Smoking remains the single largest cause of preventable deaths and one of the largest causes of health inequalities in England, accounting for approximately half the difference in life expectancy between the richest and poorest in society.
- 1.2 From increasing stillbirths, through asthma in children, to dementia, stroke and heart failure in old age, smoking causes disability and death throughout the life course. It drives many cancers, especially lung cancer which is the most common cause of cancer deaths in both women and men in the UK. It causes and accelerates heart disease, the biggest single cause of deaths overall. Smoking or exposure to second-hand smoke is a leading cause of most respiratory diseases, with current smokers 11 times more likely to develop lung cancer compared to non-smokers.
- 1.3 Smoking leads to people needing care and support, on average, a decade earlier than they would have otherwise, often while still of working age. Smokers lose an average of ten years of life expectancy, or around one year for every 4 smoking years.
- 1.4 The Government have signalled their commitment to creating a smokefree generation by setting out a plan to achieve this in the 'Stopping the Start' policy paper, published in November 2023¹. In this plan, the Government:
 - Proposes legislation so that children turning 14 this year or younger will never be legally sold tobacco products.
 - Wants to see increased action to support smokers to quit and has allocated £70 million per year for local authority led stop smoking services and support.
 - Has launched a national 'Swap to Stop' scheme to provide vape kits to local areas to offer as a quit aid.
 - Has pledged new funding for enforcement agencies to address illicit and underage sales.

2. BACKGROUND

- 2.1 Smoking is a leading cause of ill health and early death in Tameside and has a significant impact on the Tameside economy in terms of estimated costs to the NHS of £11.6 million and £7.7 million to social care.
- 2.2 The prevalence of smoking in Tameside is higher in some groups in the population:
 - At 20.2% Tameside has the fourth highest prevalence in England and the highest in the North West.
 - At 34% Tameside has highest prevalence for routine and manual smokers in the North West and 7th highest in the country.
 - 43.4% of adults with a serious mental illness smoke.
- 2.3 The impact of smoking on health and inequalities in Tameside is illustrated by the following statistics. Tameside has:
 - The 3rd highest rate of smoking attributable mortality in the North West and the fourth highest in England.
 - The 2nd highest rate of smoking attributable deaths from stroke in the North West.
 - The 3rd highest rate of smoking attributable deaths from heart disease in the North West.
 - The 6th highest rate of smoking attributable deaths from cancer in the North West.
 - The highest rate of hospital admissions for asthma (under 19 years) in England.

¹ [Stopping the start: our new plan to create a smokefree generation - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/policies/stopping-the-start)

- 2.4 The Greater Manchester Making Smoking History initiative has a city region approach to driving down smoking rates and promoting smokefree living. It's GMPOWER model underpins its strategy to reduce demand for tobacco:
- **G**row a social movement.
 - **M**onitor tobacco use and prevention policies.
 - **P**rotect people from tobacco smoke.
 - **O**ffer help to stop smoking.
 - **W**arn about the dangers of tobacco.
 - **E**nforce tobacco regulation.
 - **R**aise the real price of tobacco.

The Tameside Tobacco-free partnership objectives in 3.2 aim to support the GMPOWER model.

- 2.5 The Tameside Tobacco-Free Partnership is a collaboration of stakeholders and local representatives. Its primary role is to provide strategic leadership to deliver our smokefree ambition to improve the health and wellbeing of those who live, work, volunteer in or visit Tameside. The Partnership aims to de-normalise smoking, reduce smoking rates, minimise tobacco-related harm and contribute to reductions in health inequalities by focusing on population groups that have a high prevalence of smoking.

- 2.6 The developing Tameside Health and Wellbeing Board's Healthy Places strategic framework describes the vision for a whole system approach to improving health and wellbeing in Tameside. Tobacco control is a key workstream within this approach, alongside physical activity, food and healthy weight. Regular reports to the Tameside Health and Wellbeing Board on the progress against the tobacco-free plan as part of the wider Healthy Places strategic framework will be scheduled to ensure robust governance and oversight of delivery of the plan.

3. DEVELOPMENT OF THE TAMESIDE TOBACCO CONTROL PLAN

- 3.1 Tameside's Tobacco-free plan is informed by national and Greater Manchester strategies and sets out a systems approach for tobacco control as can be seen in figure 1 below. It assesses current strengths, challenges, and opportunities, and sets out a partnership action plan to capture activity across the local tobacco control system.



Figure 1. Tameside Tobacco-free Partnership Systems Approach to Tobacco Control

- 3.2 The strategic objectives of the plan are:
- To create a smokefree Tameside and making smokefree living the norm.

- Support smokers to become smokefree.
- Engage and support high-risk groups to become smokefree to reduce health inequalities.
- Tackle illicit and underage sales.
- Increase awareness of the costs of tobacco use (i.e. health, loss of income, sickness absence).
- Grow a smokefree movement across Tameside.

This includes de-normalising smoking to reduce the risk of children and young people starting smoking, and to create a healthy living environment.

- 3.3 Engagement on the Tobacco-free plan and the use of the Section 31 grant funding has taken place with Health and Wellbeing Board Members on 16th November 2023 and wider tobacco-free stakeholders at a workshop on 14th December 2023. The feedback from these sessions can be seen in appendix 1. Further engagement is planned between January and April 2024 with wider voluntary sector partners and the public.

4. FUNDING FOR LOCAL STOP SMOKING SERVICES

- 4.1 In October 2023, the Government published its intentions to create a smokefree generation in the 'Stopping the Start' plan (see 1.4 above). This plan included an allocation of additional Government section 31 grant funding to local authorities to enhance stop smoking service provision based on the average smoking prevalence over a 3-year period.² Tameside's allocation for 2024/25 is £0.413m. The Government has committed to providing funding for a total of 5 years, up until 2028/29, and will communicate future allocations to local authorities through the formal grant agreement process.
- 4.2 Grant funding criteria published to date states that local authorities "*must maintain their existing spend on stop smoking services, based on the stop smoking service data they have submitted for the year 2022 to 2023. They should ensure they maintain this level of funding throughout the whole grant period.*" It also states that "*There will be some flexibility at a local level for the funding to support wider tobacco control policies and efforts to reduce youth vaping, such as for local awareness-raising campaigns. However, the majority of the funding will be focused on stop smoking services and support.*" More detailed criteria are expected to be published before 1st April 2024 and will inform the final delivery plan for 2024-25.
- 4.3 Currently stop smoking services are delivered by the Council's Be Well service and through the Local Commission Service contract with Primary Care, which includes GP and Pharmacy delivery. The new funding will give the opportunity to further extend the delivery through these services, but also to invest in community and neighbourhood delivery to enable easier access to stop smoking services for residents in Tameside. With the increased use of services, funding to increase the budget for Nicotine Replace Therapy as a stop smoking aid will also be required.
- 4.4 Along with raising the profile and visibility of the stop smoking services through marketing and communications the funding will enable the development of robust community-based approach to making smoking history in Tameside. This will include the identification and support of Tobacco-free Champions, a borough wide 'very brief advice for stopping smoking' training offer, enabling access to interpreters, use of community venues for stop smoking service delivery and ongoing engagement with the communities at highest risk of smoking to understand where and how services could be delivered to make them more effective and accessible.

² [Local stop smoking services and support: funding allocations and methodology - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/news/local-stop-smoking-services-and-support-funding-allocations-and-methodology)

- 4.5 Tameside made a successful bid to the national Swap to Stop scheme for vape starter kits to offer as a quit aid.³ Vape kits will be offered by Be Well Tameside alongside behaviour change support to clients to stop smoking in early 2024. Evidence from the pilot programme delivered in Salford suggests it is expected that offering vapes as a quit aid will support more residents to successfully quit smoking.⁴ The investment will allow Be Well stop smoking service to draw down 10,000 vape starter kits equating to an additional investment of £0.400m into Tameside to support our residents to stop smoking. Specific monitoring is required for this programme which will be reported back to the Office for Health Improvement and Disparities (OHID) as the funders and through the Tameside Tobacco-free partnership.
- 4.6 The oversight and management of the programme will be provided through existing staff in TMBC's public health team. Further capacity to build community capacity, training, support community delivery and strengthen the links with GPs and Pharmacies will be provided by a Stop Smoking Community Engagement Officer.
- 4.7 The Tameside Tobacco-free Partnership will have oversight of the delivery of the enhanced stop smoking service and the wider tobacco-free plan. To measure success effectively, appropriate key performance indicators will be aligned to actions within the plan and reported against quarterly. Performance monitoring on quit rates, dropout rates and follow ups will include data on inequalities and uptake of services in underrepresented groups. This data will be used to target the stop smoking service offer to where it is most needed. Where services are being delivered by commissioned organisations, robust contract monitoring will be undertaken quarterly. An annual report on the Tameside Tobacco-free Plan will be presented to the Health and Wellbeing Board.
- 4.8 Local authorities will also be required to comply with the reporting requirements for grant expenditure related to the stop smoking service by submitting quarterly reports to NHS England.

5. SUMMARY OF PROPOSED COMMISSIONING INTENTIONS FROM 2024-2025

- 5.1 Below is a summary of the specific areas of proposed spend to deliver Section 31 grant funded enhanced stop smoking service in Tameside. The report is seeking permission to allocate the lines of spend in Table 1 below. More detailed information regarding the proposed provision can be found in appendix 2 of the report.

Section 31 Stop Smoking Service Grant Budget 2024/25 - Summary		
<i>Provision</i>	<i>Amount</i>	<i>Delivery Mechanism</i>
Oversight, monitoring, development, planning, management, and administration of the programme through existing TMBC staff:	£0.020 m	TMBC
Stop Smoking Community Engagement Officer to support outreach activity, monitoring, training and quality assurance of community stop smoking delivery (Grade F 1FTE)	£0.039m	TMBC
Nicotine Replacement Therapy Budget uplift for increased service use	£0.061m	Uplift of existing prescribing budget
Pharmacy and GP Contracts uplift for increased activity and increased numbers of smokers being supported to quit in primary care services related to the Locally Commissioned Services (LCS) Contract.	£0.029m	LCS Primary Care Contract via contract variation

³ [Smokers urged to swap cigarettes for vapes in world first scheme - GOV.UK \(www.gov.uk\)](https://www.gov.uk)

⁴ [Using e-cigarettes for smoking cessation: evaluation of a pilot project in the North West of England - PubMed \(nih.gov\)](https://pubmed.ncbi.nlm.nih.gov/)

Marketing and communications – including social media asset design, print, video production, learning network	£0.020m	TMBC
Increasing stop smoking advisor capacity in TMBC Be Well team (Grade E 2.8FTE fixed term) to support local smokers to quit	£0.099m	TMBC
Community Stop Smoking service by open tender at £0.100m per annum for 3+1 years. Total value £0.400m) to target high risk smokers in community settings	£0.100m	Open tender exercise
Equipment including carbon monoxide monitors and accessories and Pharmoutcomes licences	£0.015m	Existing purchasing arrangements via Agresso
Prevention budget with a focus on children and young people.	£0.030m	TMBC
Total	£0.413m	

6. RECOMMENDATIONS

6.1 As set out at the front of the report.