

Report to:	HEALTH AND WELLBEING BOARD
Date:	21 September 2017
Executive Member / Reporting Officer:	Debbie Watson, Interim Assistant Director of Population Health
Subject:	TOBACCO FREE GREATER MANCHESTER STRATEGY
Report Summary:	<p>The Tobacco Free Greater Manchester Strategy sets out our ambition to reduce smoking in our population by one third by 2021. This will result in 115,000 fewer smokers, supporting a tobacco free generation and ultimately helping to make smoking history.</p> <p>Ambitions within the strategy take account of targets within the newly published Towards a smoke-free generation: tobacco control plan for England. This will allow us to close the gap with smoking prevalence in England, reducing inequalities and saving thousands of lives and millions of pounds.</p>
Recommendations:	The Health and Wellbeing Board is asked to endorse the Tobacco Free Greater Manchester strategy.
Links to Health and Wellbeing Strategy:	Tobacco Control links to all priority areas in the Health and Wellbeing Strategy, in particular Living Well.
Policy Implications:	Tobacco is the leading preventable cause of cancer worldwide. It is important to prioritise policy to ensure that the Greater Manchester tobacco control implementation plan is implemented in the Tameside.
Financial Implications: (Authorised by the Borough Treasurer)	<p>The Public Health resource envelope within the Council supports existing investment of £0.483m per annum in a range of smoking cessation services. Any additional costs arising from the implementation of the Tobacco Free strategy will also be financed via this existing resource envelope.</p> <p>The cost of Non-Elective Admissions for respiratory related illness is £2.2m per year in Tameside. A significant proportion of this cost is linked to smoking related disease.</p> <p>It is essential that the Tobacco Free Strategy is stringently monitored to ensure cost reductions materialise as these will also contribute towards the reduction of the existing and projected financial gap across the local health and social care economy.</p>
Legal Implications: (Authorised by the Borough Solicitor)	The Council has a statutory duty in respect of public health and to deliver any services which are value for money in line with the NHS Constitution. It is important that any interventions are evidence based and performance monitored in order that resources can be fixed and directed to priorities. It will be key that all agencies, including the Council, update and review existing policies to ensure fit for purpose and provide consistent approach.

Risk Management :

There are no risks at this stage.

Access to Information :

The background papers relating to this report can be inspected by contacting Debbie Watson



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1.0 BACKGROUND

- 1.1 The development of the strategy has been led by the Population Health Transformation team of the Greater Manchester Health and Social Care Partnership on behalf of the Greater Manchester Cancer Board, and has been co-produced with input from a wide range of partners across Greater Manchester localities and many system and subject matter experts. This follows on from work undertaken with the Greater Manchester Tobacco Control Leaders' Network, starting in December 2015, led by Steven Pleasant.
- 1.2 The strategy has been informed by the best international and as well as local evidence and has been subject to an extensive consultation and engagement period running from November 2016 to March 2017, including an expert stakeholder development group and a key leaders workshop.
- 1.3 The following groups and bodies have been involved in its development or are part of its sign off: Action on Smoking and Health; Association Governing Group of Clinical Commissioning Groups; Cancer Education Manchester; Cancer Research UK; Directors of Public Health Group; Greater Manchester Health and Social Care Partnership; Greater Manchester Combined Authority Executive; Greater Manchester Population Health Programme Board; Greater Manchester Cancer VCSE Advisory Group; Greater Manchester VCSE Devolution Reference Group; Greater Manchester LGBT Foundation; Greater Manchester Fire and Rescue Service; Greater Manchester Tobacco Control Commissioners Group; Fresh Smokefree North East; HMRC; Healthier Futures CIC; Public Health England; Trading Standards North West; Wider Leadership Team.

2.0 GREATER MANCHESTER APPROACH

- 2.1 The changes underway under Taking Charge create a golden opportunity for a new and focussed approach to tackling tobacco harms across Greater Manchester. The tobacco control strategy graphically illustrates the human and financial costs incurred by a product which kills more than 1 in 2 long-term users and debilitates many more. Greater Manchester will reduce smoking at a pace and scale faster than any other major global city with an ambition to reduce smoking by around a third to 13% by 2021, closing the gap with England, saving thousands of lives and millions of pounds.
- 2.2 A new tobacco control programme supports the aims of the wider Population Health Plan and the Greater Manchester Cancer Plan, as well as contributing to the far wider public service reform agendas. A transformative programme of work delivered in collaboration across the system will include a range of innovative and evidence based interventions as outlined below.

Our Greater Manchester vision is for a tobacco free future where together we make smoking history for all our children. Our transformation programme delivered in collaboration with all partners will include a range of innovative and evidence based interventions delivered at scale:



Greater Manchester
Health and Social Care Partnership

Taking charge
in Greater Manchester
2017-2021

3.0 NEXT STEPS

- 3.1. To turn this strategy into action, a delivery plan for the potential initiatives outlined in section 4.1 to 4.7 of the strategy will be developed in sufficient detail to enable a stakeholder supported and implementable programme of work. The partnerships are learning from what's working well in Greater Manchester, the UK and globally to bring the very best evidence and innovation to our delivery. Further stakeholder consultation and engagement is being undertaken to facilitate this during May-September 2017. A transformation funding proposal will also be developed including full cost benefit analysis and matched/alternative funding proposals. This phase of work will be completed by September 2017.

4.0 RECOMMENDATIONS

- 4.1 As set out on the front of the report.