BRIEFING TO OLDHAM HEALTH AND WELLBEING BOARD

Report Title: Tobacco Control Plan 2017 - 2020

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Date: 14 March 2017

Requirement from the Health and Wellbeing Board:

The Health and Wellbeing Board are asked to:

- Agree the outcomes for Oldham’s Tobacco Control Plan:
  - Outcome 1: Reduce the number of tobacco users in Oldham
  - Outcome 2: Reduce exposure to second-hand smoke (focusing on children and young people)
  - Outcome 3: Reduce tobacco related health inequalities

And give its support to:

- Address tobacco control through strong partnership working on a borough wide scale - because smoking isn’t the responsibility of any single service or organisation within Oldham.
- Monitor the progression of the Tobacco Control Action Plan
- Secure senior buy-in from elected members, clinical commissioning groups, primary care colleagues and partners who we ask to also act as advocates
- Commit to participating in the CLeaR process detailed in Appendix 1
- Receive a follow up paper outlining:
  - Content of the National Tobacco Control Strategy and GM Tobacco Control Plan (being discussed on 22 March 2017)
  - How much is currently invested locally in tobacco control
  - What could be achieved with further investment
  - Potential for working more collaboratively with NHS partners

Background:

Tobacco continues to be the single greatest cause of preventable illness and early death for local people. Smokers are more likely to come from more deprived backgrounds which means that smoking is the single biggest cause of inequalities in health between the best and worst off in society.
What the issue is:

Smoking is a modifiable risk factor that affects three of the major killers in Oldham which are circulatory disease (e.g. heart attack & stroke), cancer, and respiratory disease (e.g. bronchitis). Four in five cancers are caused by tobacco use, and 90% of lung cancer is directly attributable to smoking.

Oldham's prevalence is estimated at 20%, this is a measure of the proportion of the population that are current smokers. Oldham's rate for those in routine and manual occupations is 32% which is above the England average of 28%.

For those who smoke there are real financial effects as well, because tobacco dependency adds an additional financial burden for those who are already poor. For many local people it therefore has an effect on many other aspects of life, including the ability to meet basic household bills, take up leisure activities and eat well. For some, we know that tobacco is a means of coping everyday life, and not all smokers will want to quit. However, we also know that the majority of smokers want to stop, and we intend to encourage and support as many local people as we can in their efforts to do so.

As well as smoking cigarettes, which remains the commonest form of tobacco use, there are new and emerging methods of taking tobacco such as shisha water pipes. Smokeless tobacco is another method of tobacco use which is common in South Asian communities.

In order to provide a healthy environment for communities, a healthy atmosphere for our children to grow up in, and a supportive environment in which positive lifestyle changes can be made, we need to work effectively together to deliver a multifaceted approach to the health threat that tobacco poses.

There are huge costs for Oldham as a whole; the cost to our society is estimated at £60.4m. £4m is lost in sick days; £8m is spent by the NHS treating diseases directly caused by smoking and £4.7m is spent caring for current and ex-smokers in later life as a result of smoking related illnesses.

Relationship with the Oldham Locality Plan:

Establishing an Integrated Care Organisation:
- The NHS Statement of Support for Tobacco Control provides an opportunity to support partnership working with local government and NHS organisations.

Mental Health is central to good health:
- The 2010 Health Survey for England found that smoking prevalence amongst people with a long standing mental health disorder was 37% compared to 20% in the general population.
- The number of adults in Oldham with symptoms of depression, anxiety and phobias is estimated to be around 33,000 which equates to 12,210 smokers.
- Smokers with a mental disorder are more heavily addicted to tobacco and smoke substantially more cigarettes per day than smokers in general.

Starting Well: Early Years, Children and Young People:
- Four hundred and forty five (13.5%) of women in Oldham who gave birth in 2014/15 smoked at the time of delivery, which is higher than the England average (11.4%)
- There are significant health inequalities associated with smoking in pregnancy. Rates of smoking at the time of delivery are 18.5 times higher in Hollinwood compared with Saddleworth South.
• Smoking in pregnancy is associated with a 40% increase in infant mortality and significantly increases the risk of miscarriage, still birth and cot death.
• Children born to mothers who smoke are much more likely to smoke themselves.

**Living Well: Action to Build Resilient Communities & Provide Early Help:**

• Oldham’s smoking prevalence is estimated at 22%, this is a measure of the proportion of the population that are current smokers.
• Oldham’s rate for those in routine and manual occupations is 36.3% which is the highest in Greater Manchester and well above the England average of 26.5%.
• It is estimated that on average a smoker in Oldham spends over £1700 a year on cigarettes.
• Poorer smokers can spend a disproportionately large amount of their income on cigarettes compared with more affluent smokers. Therefore smoking can have a big impact on household finances and contribute to poverty.

**Recommendations:**

• Agree the actions detailed in the action plan below
• Address tobacco control through strong partnership working on a borough wide scale - because smoking isn’t the responsibility of any single service or organisation within Oldham
• Monitor the progression of the Tobacco Control Action Plan
• Secure senior buy-in from elected members, clinical commissioning groups, primary care colleagues and partners who we ask to also act as advocates
• Commit to participating in the CLeaR process detailed in Appendix 2 of the strategy
• Receive a follow up paper outlining:
  ➢ Content of the National Tobacco Control Strategy and GM Tobacco Control Plan (being discussed on 22 March 2017)
  ➢ How much is currently invested locally in tobacco control
  ➢ What could be achieved with further investment
  ➢ Potential for working more collaboratively with NHS partners
  ➢ How a ‘Wellness Service’ could better address tobacco control in Oldham
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<th>Potential lead agency/team</th>
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<td>Complete the first phase of the CLeaR process</td>
<td>Run a local self-assessment. Identified key players to score Oldham’s local approach to tobacco control against the items in the CLeaR questionnaire</td>
<td>OMBC – Public Health All organisations represented on Health and Wellbeing Board</td>
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<td>Tackle the accessibility of tobacco products for young people, particularly in relation to illegal and illicit tobacco, underage sales and niche products</td>
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<td>Targeted enforcement activity</td>
<td>Carry out joint inspections with partner agencies as appropriate using intelligence to target high risk businesses to look for illicit tobacco - Appropriate action against sellers of illicit tobacco in line with the Councils enforcement policy. Ensure local enforcement of new and existing tobacco control regulations Ensure compliance with the ban on smoking in work places and business premises</td>
<td>Trading Standards</td>
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<td>1. Protect children, families &amp; communities from second hand smoke</td>
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<td>Phase 1: Develop a targeted smokefree homes scheme for pregnant women and their families</td>
<td>A smokefree homes schemes which incorporate the ‘take seven steps’ rule Roll out to commence initially in the wards with the highest smoking at time of delivery rates: Hollinwood Alexandra St James</td>
<td>Public Health Positive Steps Maternity services Health Visitors Children's Centres</td>
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<td>Develop a smokefree school gates policy across all primary schools</td>
<td>To protect all children at school gates from second-hand smoke</td>
<td>Public Health Education</td>
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| Revise Oldham Council’s smoking policy | To include:  
- Exploration of the concept of smokefree sites including smoking shelters  
- Support for staff to quit smoking  
- Use of e-cigarettes in the work place  
- Inclusion in staff induction | Public Health  
Environmental Health  
Councillors  
Staff  
HR | |
| Phase 2: Explore the feasibility of smokefree playgrounds and touchlines | | | 2018 |
| 3. Increase the number of referrals into Oldham’s Stop Smoking Service particularly from primary care, secondary care and community services | Provide highly effective support for smokers who want to quit | Undertake an audit of the Stop Smoking service against PH10 NICE guidance | Public Health Positive Steps |
| Review/update/implement referral systems in:  
- Acute settings  
- Primary care  
- Community services | Review current referral numbers into the stop smoking service  
Ensure referrals are embedded in relevant pathways to ensure those who would benefit the most from quitting have access  
Report current activity back to referrers and develop a referral feedback mechanism to allow future monitoring of referrals  
Ensure all identified areas have current stop smoking service information and contact details | Public Health Positive Steps  
Partners in:  
- Acute settings  
- Primary care  
- Community services | |
| 4. Increase the number of pregnant women accessing the Stop Smoking Service and quitting or reducing harm, | | | |
ultimately aiming to reduce the number of those smoking at time of delivery

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<td>Support maternity services to ensure opt-out referral pathway is functioning effectively</td>
<td>Implement referral feedback mechanism to maternity services</td>
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<td>Staff from stop smoking service to attend mandatory training for midwives for two way information sharing</td>
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<td>Set up a Stop Smoking session based at ante-natal secondary care setting</td>
<td>A stop smoking session in conjunction with ante-natal clinics so women can have instant access to the stop smoking service reducing barriers</td>
<td>Positive Steps Maternity services</td>
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5. Reduce the number of children and young people taking up smoking

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<td>Perform test purchase exercises</td>
<td>Carry out 6 under age sales operations throughout the year using a child volunteer to purchase age restricted products from targeted premises</td>
<td>Trading Standards</td>
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<td>Increase the knowledge &amp; therefore confidence of young people to enable them to make informed decisions about their use of tobacco and e-cigarettes</td>
<td>Through the use of social media and 'crowdspeaking' platforms such as Thunderclap, which lets individuals and companies rally people together to spread a message</td>
<td>All partners across Oldham</td>
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6. Increase uptake of Stop Smoking services amongst target groups such as routine and manual workers, BME groups, people with mental health issues and low income communities

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<td>Work with routine and manual employers to promote 'stop smoking' in the workplace</td>
<td>Starting with taxi drivers; offer stop smoking interventions in the work places and/or ensure workplaces have current information of how staff can access the stop smoking service in the community</td>
<td>Positive Steps</td>
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<td>Support the development of Public Health’s Healthy Living Mosque concept which will be used to target BME men and</td>
<td>An enabling process for Oldham Mosques to support healthy lifestyle behaviours in this case education about the use of tobacco, both smoking and</td>
<td>OMBC/Public Health</td>
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<td>families</td>
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<td>A co-ordinated offer of support for the Mosques to act upon.</td>
<td>Expand the provision of Make Every Contact Count (MECC)</td>
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