

GM Outcome Based Common Standard: Tobacco Control		
GM Shared Vision:		
<p>2017 saw the launch of the government’s new tobacco control strategy for England, “Towards a Smokefree Generation” which expresses a desire to reduce adult smoking prevalence levels to 5% or less by 2030. Challenging interim targets are set.</p> <p>Smoking is still by far the biggest single cause of early death and ill health in Greater Manchester, with huge economic impact. Although our starting point, in terms of achieving the government’s targets, is much more challenging than in more affluent areas, we are no less ambitious or aspirational. We have developed a model, called harm. This model is based on the World Health Organisation Tobacco Control Framework.</p> <p>Smoking rates have reduced across Greater Manchester in recent years, but we now need to make change at scale and pace if we are to meet meet national and GM targets. We must ensure that good practice is applied consistently in all areas of GM and try new programmes, particularly in NHS settings, such as secondary care. By aim to cut smoking rates across Greater Manchester by one third by 2021.</p> <p>The common standards for tobacco control are challenging, will require change and make the agenda the responsibility of GM Health and Social Care, local authorities, Clinical Commissioning Groups, Acute Trusts, NHS providers and partners.</p>		
GM Common Standards:		
Strategic Outcome: Improving the Health of the GM Population and Reducing Health Inequalities across GM		
"I" Statement: " I will live a long and healthy life in Greater Manchester"		
Outcome	Standard	Method of Measuring Impact
Whole system Tobacco Control is embedded in Health and Social Care and the Environment	The GM Power model for Tobacco Control will be translated into local plans for each area of GM.	Each area of GM will have a Tobacco Control Plan based on GM Powe
Strategic Outcome: Start Well - Give every GM child the best start in life		
"I" Statement: " I will make sure that every GM child will has the best start in life and will develop well"		
Outcome	Standard	Method of Measuring Impact
Children are protected from tobacco related harm from conception onwards	All pregnant women will have a Carbon Monoxide breath test	% of pregnant women who have a Carbon Monoxide Breath test
	All pregnant women who smoke are referred to services which can help them to stop smoking during their pregnancy	Smoking at time of delivery rates (SATOD) reduce (N.B. target 6% by 2021 f
Children and young people will be protected from Environmental Tobacco Smoke	All families are supported to achieve a smoke free home	Smoking prevalence rates aged 15 years
		Adult Smoking prevalence rates reduce (N.B. target 13% by 2021 for G
		Numbers of smoking related accidental dwelling fires, injuries and deaths record
Strategic Outcome: Live Well - Ensure every GM resident is enabled to fulfil their potential		
"I" Statement: "I will maintain good health and wellbeing and will have good and equitable access to information, support and services"		
Outcome	Standard	Method of Measuring Impact
All smokers in GM understand the risks of smoking and tobacco related harm	Each area in GM will adopt a Making Every Contact Count approach: all front line staff are able to talk about the risks associated with smoking. (NB. suggest front line NHS staff, Housing Officers, Social Care Professionals)	Numbers of staff trained per year to talk about smoking (type of training to be dete
		% of designated frontline staff trained
All smokers should be able to access all available frontline pharmacotherapies. Combination Nicotine Replacement Therapies should always be an option. Any pharmacotherapy supplied should be alongside motivational support	Publicised arrangements are in place for smokers to access pharmacotherapy and motivational support in all areas (Including advice about nicotine inhaling products)	Adult smoking prevalence rates
		% of smokers helped to quit through local stop smoking services.
Tobacco Control measures (including smoking cessation support) will focus on groups known to have higher smoking prevalence rates in order to reduce smoking related health inequalities	All areas will have plans to focus resource on the areas and groups with the highest prevalence of smoking (routine and manual occupation; mental health problems; LGBT community; groups with complex long term conditions caused or exacerbated by smoking; locally identified priority groups; offenders).	Routine and manual smoking rates
		Adult smoking prevalence rates
		Smoking at time of delivery (SATOD)
All smokers admitted to hospital will be assessed and treated for nicotine addiction irrespective of the cause of admission . (There will be zero tolerance to smoking for staff, patients and visitors).	All smokers admitted to hospital will receive appropriate pharmacotherapy and motivational support as inpatients and on-going support on discharge. The “CURE” programme is an example of an appropriate model .	• NB. No measures routinely available for measuring in other groups which is something tha at in due course.
		Adult smoking prevalence
		Smoking related hospital admissions
Strategic Outcome: Age Well - Every adult will be enabled to remain at home, safe and independent for as long as possible		
"I" Statement: "I will be able to be safe and independent for as long as possible"		
Outcome	Standard	Method of Measuring Impact
People who have conditions caused by or exacerbated by smoking will be supported to stop smoking	All people aged 50 and over who have a smoking related or smoking exacerbated chronic condition will be offered evidence based support to stop smoking.	Smoking related conditions for people aged 50 and over.
All smokers aged 50 and over admitted to hospital will be assessed and treated for nicotine addiction, irrespective of the cause of admission. (There will be zero tolerance to smoking for staff, patients and visitors).	All smokers, irrespective of age, who are admitted to hospital, will receive appropriate pharmacotherapy and motivational support as inpatients and on-going support on discharge. (the "CURE" programme is an example of an appropriate model .	Smoking related hospital admissions for people aged 50 and over
Strategic Outcome: Enabling resilient and thriving communities and neighbourhoods		
"I" Statement: "I will live, work and play in a strong and thriving community and neighbourhood"		
Outcome	Standard	Method of Measuring Impact
Tobacco Legislation is enforced and illicit tobacco is countered.	Publicised arrangements are in place for members of the public to report concerns about illicit tobacco and breaches of legislation e.g. underage sales.	Numbers of reports to local Trading Standards teams
		Numbers of intelligence lead inspections and test purchases
Fewer smoking related accidental dwelling fires means that GM homes and residents are safer	All areas will work towards making all GM homes smoke free	Numbers of smoking related accidental dwelling fires, injuries and deaths record
Smoke free hospitals : there is zero tolerance to smoking for staff, patients and visitors in all hospitals across GM	All acute and mental health trusts to develop and implement a Smokefree policy	Nice guidance PH48 will be implemented in full
There will be more smoke free public spaces in GM	All areas will increase the number of voluntary schemes promoting smoke free family spaces	Numbers of new voluntary smoke free family spaces per GM area
A smoke free Public Sector	All public organisations’ sites and grounds are supported to be smoke free	% compliance rates



Additional relevant guidance for commissioners and providers (i.e NICE Guidance; National Strategy; GM Strategy; Associated GM Common Standards)	
Name	Link
Towards a smoke free generation: tobacco control plan for england	<a href="https://www.gov.uk/government/publications/towards-a-smoke-free-generation-tobacco-control-plan-for-england">https://www.gov.uk/government/publications/towards-a-smoke-free-generation-tobacco-control-plan-for-england</a>
Making Smoking History: A Tobacco Free Greater Manchester	<a href="http://www.gmhsc.org.uk/assets/Tobacco-Free-Greater-Manchester-Strategy.pdf">www.gmhsc.org.uk/assets/Tobacco-Free-Greater-Manchester-Strategy.pdf</a>
Smoking:stopping in pregnancy and after childbirth/NICE guidance, ph26	<a href="https://www.nice.org.uk/guidance/ph26">https://www.nice.org.uk/guidance/ph26</a>
Smoking:supporting people to stop (new guidance pending).	<a href="https://www.nice.org.uk/qs43">https://www.nice.org.uk/qs43</a>
Smoking: acute, maternity and mental health services	<a href="https://www.nice.org.uk/guidance/ph48">https://www.nice.org.uk/guidance/ph48</a>
Greater Manchester Fire and Rescue Service - Fire Safety at Home	<a href="http://www.manchesterfire.gov.uk/media/4554/working-in-partnership-preventing-fires-and-improving-health-and-wellbeing.docx">http://www.manchesterfire.gov.uk/media/4554/working-in-partnership-preventing-fires-and-improving-health-and-wellbeing.docx</a>
NCSCT-National Centre for Smoking Cessation and Training	<a href="http://www.ncsct.co.uk">www.ncsct.co.uk</a>