

Cabinet Member for Adults and Health	Ref No: AH13 18/19
January 2019	Key Decision: Yes
Approval to develop a new West Sussex Tobacco Control Strategy with stakeholders	Part I
Report by Sue Carmichael, Public Health Lead for Healthy Lifestyle	Electoral Division(s): All
<p>Summary</p> <p>This paper sets out a proposal regarding the County Council working in partnership with stakeholders to co-produce a West Sussex strategy for tobacco control. The strategy will detail the West Sussex ambition to lead tobacco control actions which will reduce health inequalities and yield economic benefits. The plan is intended to cover the period 2019-2022; a timeframe aligned with the National Tobacco Control Plan</p> <p>The previous West Sussex Tobacco Plan was launched in 2014 and this plan ended in 2018 so it needs to be replaced. The previous plan addressed the local implications of national policy at the time; broadening action from stopping smoking to wider tobacco control. The proposed future strategy will target deprived areas and people with the greatest need based on best population data and evidence of effectiveness. It will take into account changes in context since the previous plan including resources available to stakeholders, the draft Health and Wellbeing Strategy, future plans for social care and the NHS (such as the NHS long term plan) and the Sustainability and Transformation Partnership Case for Change. It will be informed by learning from other areas (including innovations). The strategy will highlight how each stakeholder can support tobacco control as part of a whole system approach (in line with the West Sussex Public Health vision).</p> <p>If approved, awareness of the West Sussex Tobacco Control Strategy will be raised on No Smoking Day 13th March 2019, at an event in an area of the county with a high smoking prevalence.</p>	
<p>West Sussex Plan: Policy Impact and Context</p> <p>Tobacco control is important to achieving ambitions in all priorities in the West Sussex Plan.</p> <p>Best start in life – Smoking in pregnancy increases risk of miscarriage, still birth and babies being born with long term medical conditions. Children brought up in a home with tobacco are at increased risk of illness such as asthma and chest infections, resulting in more time off school. Parental smoking is the biggest factor influencing young people smoking.</p> <p>A prosperous place- Addressing the supply of illicit tobacco supports West Sussex businesses and communities. Reduction in smoking improves productivity by reducing sickness absence and smoking breaks.</p> <p>Strong safe and sustainable Tobacco control is a key factor in reducing inequalities. Smoking prevalence is highest in the areas of greatest deprivation. Those working in routine and manual jobs are twice as likely to smoke as those in managerial and professional roles.</p>	

The illicit tobacco trade supports criminal activity.

Independence for later life Quitting smoking is the biggest single thing an individual can do to improve their health and it is never too late to stop smoking. Smoking contributes substantially to the demand for social care as well as health care.

A council that works for the community The West Sussex Tobacco Control Strategy is a partnership strategy, indicating actions across local systems to achieve the nationally recommended ten high impact changes.

Financial Impact

The development, production and launch of this tobacco control strategy will be resourced from the public health grant in the financial year 2018/19 (this mainly comprises of staff time). The partners of the Smokefree West Sussex Partnership will be invited to contribute their own resources to deliver their relevant actions.

Smoking costs West Sussex more than £196 million per year. The total additional spending on social care as a result of smoking for adults aged 50 and over during 2015/16 in West Sussex is estimated to be approximately £20,704,000.

Recommendation

The Cabinet Member for Adults and Health is recommended to approve and support the proposal for the development of a West Sussex Tobacco Control strategy 2019-2022 with stakeholders.

PROPOSAL

1. Background and Context

- 1.1 Reducing inequality in life expectancy is a key performance objective in the West Sussex County Council (WSCC) Public Health Directorate Business Plan. It is aligned with the West Sussex Public Health vision; for 'all our residents to start well, live and work well, and age well – with a focus on reducing the health and wellbeing gap in communities of highest need'. This work acts at both an individual and community level with potential to contribute to Public Health systems leadership for each place.
- 1.2 Smoking is the leading cause of premature morbidity and mortality in England. This is higher than all other causes of preventable deaths combined. Smoking is also central to tackling health inequalities as smoking related death rates are higher in low income groups compared to wealthier groups.
- 1.3 Smoking prevalence in West Sussex, like the rest of England, is at its lowest rate since records began, at 12.4% but this hides variation across the districts and different population groups. Adults working in routine and manual occupations are more than twice as likely as those in professional or managerial roles to smoke.
- 1.4 Smoking in pregnancy rates remains stubbornly high along the Coastal strip compared to the national ambition and cultural attitudes to smoking show differences within different ethnic groups. Mental health service users have smoking rates above the general population.

- 1.5 The What about Youth Survey found that a higher proportion of young people in West Sussex (aged 15) are smokers compared to England as a whole.
- 1.6 The West Sussex Tobacco Control plan was last updated in 2014. This plan ended in 2018 and needs to be renewed.
- 1.7 In July 2017 the Department of Health and Social care published 'Towards a smoke free generation: a tobacco control plan for England'.
- 1.8 The objectives of the national plan are to
 - Reduce the number of 15 year olds who regularly smoke from 8% to 3% or less.
 - Reduce smoking among adults in England from 15.5% to 12% or less.
 - Reduce the inequality gap in smoking prevalence between those in routine and manual occupations and the general population.
 - Reduce the prevalence of smoking in pregnancy from 10.5% to 6% or less.
- 1.9 To reduce tobacco use needs a co-ordinated approach across society to address the factors that influence individual behaviour. Stop smoking services, commissioned by public health, are part of the solution but will not have the desired effect in isolation.
- 1.10 The Department of Health identified 10 High Impact Changes to address tobacco control, and the West Sussex strategy will consider each of these and how they impact on individual choice, the community and the wider environment.
- 1.11 The national strategy is valid from April 2019 until March 2022 with annual updates of progress and review of new evidence.

2. Proposal Details

- 2.1 This Report recommends the renewal of the Tobacco Control Plan for West Sussex to run from April 2019 to March 2022 in line with the national plan <https://www.gov.uk/government/publications/towards-a-smoke-free-generation-tobacco-control-plan-for-england>
- 2.2 Smoking costs West Sussex more than £196 million per year through health and social care, sickness absence and fires . The total additional spending on social care as a result of smoking for adults aged 50 and over during 2015/16 in West Sussex was approximately £20,704,000 (ASH 2017).
- 2.3 It exacerbates inequalities between the most and least deprived in the county. There are at least 73,413 households in West Sussex with at least one smoker. When net income and smoking expenditure is taken into account 24% of households with a smoker fall below the poverty line. If these smokers were to quit an estimated 5,362 households in West Sussex would be elevated out of poverty.
- 2.4 "The mission of comprehensive tobacco control programmes is to reduce disease, disability and death related to tobacco use. A comprehensive

approach- one that optimizes synergy from applying a mix of educational, clinical, regulatory economies and social strategies has been established as the guiding principle for eliminating the health and economic burden of tobacco use ." (US Surgeon General cited in the Tobacco Control Plan for England).

- 2.5 The driving ethical principle of tobacco control is that of fairness. A fairness for children and young people to grow up in an environment where smoking is not seen as the norm, for smokers to get help to quit and for people to live and work without being exposed to the hazards of second hand smoke.
- 2.6 The proposed future West Sussex Tobacco Control Strategy would consider the data available and national policy to determine a whole system approach, with actions for the next three years based on the 10 High Impact changes and considering the impact on the individual, the community and the environment.
- 2.7 The members of the Smokefree West Sussex Partnership, on behalf of the organisations they represent, are responsible for the delivery of the action plan and for raising the awareness of the impact of tobacco in a community.
- 2.8 The Smokefree West Sussex Partnership currently consists of representation from the District and Borough Wellbeing teams, NHS Trusts, Health4 Families, West Sussex Trading Standards and West Sussex Fire and Rescue Service.

3. FACTORS TAKEN INTO ACCOUNT

3.1 Consultation

The members of the Smokefree West Sussex Partnership have been consulted about this strategy and have contributed to the development of the draft action plan.

Tobacco Control strategy has also been discussed at the West Sussex Health and Wellbeing Board and their views have been considered.

3.2 Financial (revenue and capital) and Resource Implications

Development of the strategy will be led by public health as part of business as usual. The action plan will be developed by the members of the Smokefree West Sussex Partnership (SFWSP) and will consider the resources they have available to deliver. This group will monitor the progress of the action plan in their quarterly meetings.

There may be increased activity in the stop smoking services which are currently funded by public health. However there is complete understanding as to how the smoking recommendations of the NHS Long Term Plan will be implemented but it is not possible to say how much additional activity we may have manage.

3.2.1 Revenue consequences of proposal

	Current Year 2018/19 £m	Year 2 2019/20 £m	Year 3 2020/21 £m	Year 4 2021/22 £m
Revenue budget	0	0	0	0
Change from Proposal	0	0	0	0
Remaining budget	0	0	0	0

3.2.2 Capital consequences

	Current Year 2018/19 £m	Year 2 2019/20 £m	Year 3 2020/21 £m	Year 4 2021/22 £m
Capital budget	0	0	0	0
Change from Proposal	0	0	0	0
Remaining budget	0	0	0	0

3.3 The effect of the proposal

A county wide tobacco control strategy with contributions from partners across the system will address inequalities across West Sussex as well as improve health outcomes. Tobacco use is greater in the more deprived areas, and routine and manual workers are twice as likely to smoke compared to those in professional and managerial occupations. Almost a quarter of households with a smoker fall below the poverty line. If these smokers were to quit an estimated 5,632 households in West Sussex would be elevated out of poverty. This means that approximately 14,458 people would not be below the poverty line if the cost of smoking were returned to the household, including 3,018 dependent children.

3.4 Future transformation, savings/efficiencies being delivered

There has been a significant reduction in the public health grant budget available for tobacco control since the last tobacco control plan. The 2018/19 budget is 25% of what it was in 2016/2017 (£970k to £246k). Local improvements can only be maintained if a whole system approach is developed and tobacco control becomes part of business as usual for all sectors. The smokers that remain are those where tobacco use is engrained into their lives and so particular targeted work, based on insight, needs to be addressed.

4. Human Resources, IT and Assets Impact

The strategy will be developed and the actions monitored by the existing public health lead for healthy lifestyles and the programme manager for healthy lifestyles for whom this is business as usual. There are no additional human resources, IT and asset impacts for WSCC. However reductions in resources to partners may impact on their ability to deliver against their currently agreed actions.

5. Legal Implications

Smoking cessation/tobacco control is not a mandatory public health service under Health and Social Care Act 2012 or Part 2 of the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013, it is discretionary. However, it is still within the Council's power to set a strategy if it wishes.

5.1 Risk Assessment Implications and Mitigations

There are no substantial risks to be considered in weighing up if this strategy should be supported. There are risks to the delivery of the action plan if reductions in resources continue. Therefore the services signed up to deliver are no longer able to consider addressing tobacco use as business as usual. This could result in reputational risk to the county council.

There is a risk to the population of West Sussex that the impacts of tobacco use in West Sussex are not reduced and the inequality gap increases.

5.2 Other Options Considered (and reasons for not proposing)

The expired tobacco control plan could have not been updated. This would have left West Sussex without a current local plan based on national evidence. Due to changes locally and nationally the 2014 plan is no longer fit for purpose.

The importance of tobacco control as a whole system approach to addressing inequalities suggests it is advisable to have a county wide strategy.

5.3 Equality and Human Rights Assessment

Under the Equality Act, the council has a public sector equality duty. It must show how it has due regard to the need to:

- eliminate unlawful discrimination, harassment and victimisation;
- advance equality of opportunity between people who share a protected characteristic and people who do not share it; and
- foster good relations between people who share a protected characteristic and people who do not share it.

As this decision is regarding the updating of a previous plan, there is no impact on individuals or groups with regard to these three principle duties.

The proposal does not affect the Council's duties under the Human Rights Act as the decision does not discriminate against groups with protected characteristics. The tobacco control strategy could be considered as discriminating positively towards those with protected characteristics, where tobacco use is more prevalent in some of these groups (such as pregnancy and ethnicity).

5.4 Social Value and Sustainability Assessment

The strategy supports individuals who live and work in West Sussex and their families to access communities that are free from tobacco smoke and the harm to health it causes.

Stop smoking services are provided in local communities, in general practice and community venues. This reduces the amount of travel needed to access them and using local organisations to deliver the service (following training) retains skills in the county.

The variation in tobacco use across the county and the recognition that attitudes and smoking practices are different within different population groups requires the action plan to suit local need. Much of the action needs to be driven and supported by communities in order to see sustained change.

Litter from smoking materials is an issue across the country, getting a specific mention in the National Litter Strategy and second hand smoke impacts on air quality. There is social value to be had from addressing both of these issues.

Tobacco use is the single biggest lifestyle factor that contributes to poor health in smokers and their families. This paper has already highlighted the cost to society through the health and social care system as well as sick leave. An effective tobacco control strategy can reduce some of the burden on society caused by smoking.

Tobacco exacerbates inequalities between the most and least deprived in the county, a co-ordinated system wide tobacco control plan will have a positive impact on this.

5.5 Crime and Disorder Reduction Assessment

None – this decision is about updating a previous plan. However tobacco users are often among the most vulnerable in society including those with mental health issues. The strategy supports reduction in crime and disorder by supporting them to quit therefore increasing their available income and possibly moving them from below the poverty line.

This tobacco control strategy highlights the importance of addressing illicit tobacco sales which are often directed to those members of the community who are most vulnerable. Improving the reporting of illicit behaviour to increase the intelligence available to trading standards enables them to take appropriate action and prosecute the offender.

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Appendices - none

Background papers – The West Sussex Tobacco Control Operational Plan