

## **TELFORD & WREKIN COUNCIL**

**HEALTH & WELLBEING BOARD:** 18<sup>th</sup> September 2013

### **TITLE:**

Health & Wellbeing Priority Update: Reduce the number of people who smoke

### **REPORT OF:**

Vicki Pike Health Improvement Commissioner, Telford & Wrekin Council  
Helen Onions Interim Assistant Director, Health & Wellbeing, Telford & Wrekin Council

### **HEALTH & WELLBEING BOARD PRIORITY SPONSOR:**

Paul Taylor, Interim Director of Health, Wellbeing and Care , Telford & Wrekin Council

## **PART A) – SUMMARY REPORT**

### **1. SUMMARY OF MAIN PROPOSALS**

A new strategic approach for tobacco control in Telford & Wrekin is currently in development. The main elements of the strategy, which is being developed to reduce the number of people who smoke, include:

- Ensuring high-quality, innovative stop smoking services are delivered by the new providers as part of the recently awarded contracts
- Reconvening of the local tobacco control network across HWB partners
- Undertaking the Ash CLear self assessment for tobacco control with partners
- Development of an action plan to reduce smoking in pregnancy, following the asset mapping workshop in July
- Support for national campaigns: Stoptober (October), harm reduction (January) and second hand smoke (March)

### **2. RECOMMENDATIONS (AND TO WHOM ACTIONS APPLY e.g. CCG, Council)**

The Board is requested to note the recent developments for the smoking priority, in particular: the award of stop smoking services contracts and the outline of the developing strategic approach being taken for tobacco control

### **3. IMPACT OF ACTION - (How it is intended that action will make a difference)**

- Stop smoking services contracts will be managed to ensure delivery of high quality and value for money services
- Reduction in smoking-related harm and health inequalities related to smoking
- Reduction in the number of mothers smoking during pregnancy
- Ash CLear self assessment undertaken across partners as part of the development of a multi-agency tobacco control strategy and action plan

#### **4. SUMMARY IMPACT ASSESSMENT**

<b>COMMUNITY IMPACT</b>	Do these proposals contribute to a specific HWB Priority -	
	Yes	Reducing the number of people who smoke
	Do these proposals contribute to specific Co-Operative Council priority objective(s)?	
	Yes	To improve the health and wellbeing of our communities and address health inequalities
	Will the proposals impact on specific groups of people?	
	Yes	See equality and diversity section below
<b>TARGET COMPLETION/DELIVERY DATE</b>	<ul style="list-style-type: none"> <li>➤ Stop smoking services contracts start date - September 2013, with quarterly contract reviews in Dec 2013, March 2014, June 2014 and Sept 2014</li> <li>➤ Quarterly data entry to the national data system</li> <li>➤ Tobacco control self assessment to be completed December 2013</li> <li>➤ Tobacco control strategy and action plan to be agreed by March 2014</li> </ul>	
<b>FINANCIAL/VALUE FOR MONEY IMPACT</b>	Yes	<p>The budget agreed for smoking cessation services and tobacco control work as part of the local authority public health grant is £713.6k for 2012/13.</p> <p>There is sound evidence that smoking cessation services are highly cost effective.</p>
<b>LEGAL ISSUES</b>	Yes	The mandatory duty to ensure the provision of stop smoking services transferred to the Council in April 2013 in accordance with the provisions of the Health and Social Care Act 2012. The award of the contracts set out in this report are to ensure that those statutory obligations are met. This report confirms that provisions are in place to check and review the performance of the contractors in meeting their obligations and accordingly ensure that the Council's statutory responsibilities are fulfilled.
<b>EQUALITY &amp; DIVERSITY</b>	Yes	Contracts include specific targets around engagement with hard to reach groups. The evidence is that people from our most deprived communities are more likely to smoke. Local JSNA intelligence has helped to inform service provision, with data supporting the stop smoking providers to design and deliver their services. As part of the new contracts the service providers are encouraged to recruit and support smokers from the following specific demographic

		<p>subgroups:</p> <ul style="list-style-type: none"> <li>➤ Pregnant women</li> <li>➤ People from Ethnic Minorities</li> <li>➤ Unemployed people</li> <li>➤ People living in deprived areas</li> <li>➤ Young people under 25 years</li> <li>➤ People with mental health problems</li> <li>➤ People who are deaf, hard of hearing, blind or partially sighted</li> </ul>
<b>IMPACT ON SPECIFIC WARDS</b>	Yes	Ward-level data are collected as part of the JSNA and this intelligence is being used to identify and prioritise wards and GP practices with high levels of smoking.
<b>PATIENTS &amp; PUBLIC ENGAGEMENT</b>	No	<p>The intention is to engage with pregnant women who smoke during the Autumn 2013 to ensure their views influence the future development of stop smoking services and tobacco control measures.</p> <p>All quit smoking clients are asked to complete a satisfaction forms as they leave the service or at 4 and 12 weeks quit.</p>
<b>OTHER IMPACTS, RISKS &amp; OPPORTUNITIES</b>	Yes	<p>There are smoking key performance indicators in a number of Council and CCG contracts, including: school nursing, health visiting, maternity and health improvement services. A co-commissioning approach between the Council and the CCG is vital given the key role the CCG has in commissioning healthcare services e.g. maternity services.</p> <p>It is expected that providers will use the Making Every Contact Count approach at every opportunity, checking smoking status and either providing smoking information or making referrals to a stop smoking service. The current contract for maternity services has an 'opt out' measure where all smoking mothers are automatically referred to a stop smoking service unless they specifically 'opt out'.</p>

## **PART B) – ADDITIONAL INFORMATION**

### **1. INFORMATION**

#### **1.1 Background**

Research has shown that smoking is a major cause of health inequalities, accounting nationally for half of the difference in mortality between the richest and poorest in our society. People who smoke are more likely to be from lower socio-economic groups and due to their increased risk of smoking-related disease have a reduced life expectancy. Smoking is also a key risk factor in foetal growth restriction, low birth weight and sudden infant death syndrome.

Reducing the numbers of people who smoke was agreed as a HWB strategy priority in Telford & Wrekin in light of JSNA intelligence which indicates: the high rate of smoking-related deaths and smoking-related hospital admissions and the persistently high level of maternal smoking, particularly amongst young women.

#### **1.2 Stop smoking services contracts**

Following a competitive tender process Telford & Wrekin Council recently awarded one year contracts for stop smoking services to two new providers. During August 2013 there was regrettably a gap in service in Telford & Wrekin, with no stop smoking service operating. This was due to unforeseen issues relating to the contracts award. The new contracts commenced in September 2013 and smokers identified as wanting to quit during August are rapidly being followed up by the new providers. Commissioning leads working with the two new providers have been carefully managing associated issues linked to the establishment of the new services, for example through:

- communications with GP practices and pharmacies
- supporting clients referred in August who are waiting for support
- marketing and communications to the public
- development of service implementation plans from the two providers

##### **1.2.1 Core and out of hours services**

Ice Creates Ltd, a national company with a proven track record of delivering evidence-based behavioural change through their Stop4Life service, was awarded contracts for the stop smoking core service and the out of hours service. Over the coming year the contracts expect 1,500 4-week quits, 750 12-week quits and 375 6-month follow-up quits as part of the core service and 500 4-week quits, 250 12-week quits and 125 6-month follow up quits through the out of hours service.

Stop4Life is an experienced NHS-funded stop smoking service providing services to councils in Staffordshire, Stoke on Trent, Coventry, Warwickshire and Worcestershire. The Stop4Life service model for Telford & Wrekin will include a blended delivery approach - ensuring equitable access and the ability for clients to be seen in hours and out of hours, elements included are:

- **Proactive Community Outreach** – to generate quality referrals for the service and deliver smoking cessation support in appropriate

community settings such as community centres, faith venues, retail settings, Children's Centres, leisure centres as well as health settings

- **Primary Care sub contracting arrangement** – development of a network of GP, dental and pharmacy sub-contractors who will receive close mentoring and training. Services will also be delivered within GP practices and pharmacies
- **Workplace Service** - working with employers of all sizes to deliver workplace-based 1-1 and group support to employees wishing to make a quit attempt
- **Online/Telephone Support/home visits** - offering clients the remote support, using proactive telephone cessation, text messaging, email and online support alongside face-to-face appointments.

### 1.2.2 Pregnancy services

The company North 51 were awarded the smoking in pregnancy service contract. Through their Quit51 service they will support 150 pregnant women to quit and also follow up women for 6 months. The service is led by Emma Croghan who was previously the national tobacco control delivery lead at the Department of Health. Therefore the company has a pedigree in relation to the evidence of effectiveness in smoking cessation service delivery and thorough understanding of national guidance.

Quit51 is led, delivered and managed by qualified clinicians who have been working in behaviour change and smoking cessation for many years; and who come from a variety of clinical backgrounds, mainly public health nursing. Quit51 aims to provide services which are fully evidence-based and which give every smoker the best chance of quitting at every attempt. Quit51 works closely with the National Centre for Smoking Cessation and Training (NCSCT) and is also commissioned to undertake external audits of delivery against the national training protocols. The focus will be the offer of known evidence-based options to reduce the harms of smoking and to improve health outcomes for every pregnant smoker in Telford & Wrekin. The service aims to support women through friendly and informative conversations to discuss all of the practical options available to maximise their success.

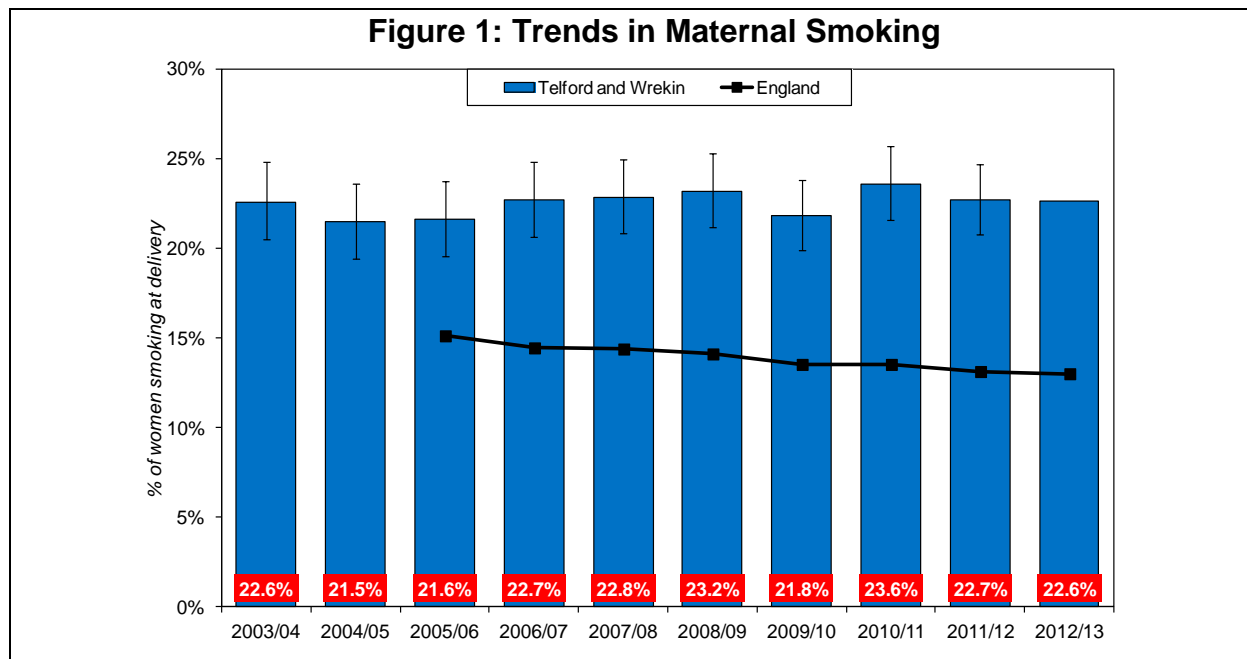
### 1.2.3 Hospital stop smoking service

The Council also have a contract with Shrewsbury and Telford Hospitals NHS Trust (SaTH) to deliver the stop smoking in hospital service, which supports both in and out patients. Over the years the service has grown considerably, consistently increasing the number of people it has reached and referred to onto community-based stop smoking services. The number of referrals into the hospital service increased from 800 in 2002/03 to 2,347 in 2012/13. Figures for 2012/13 indicate impressive quit rates with over 80% of smokers setting a date still quit at 4 weeks. This is considerably higher than the national average quit rate of 55%.

### 1.3 HWB priority focus: Maternal smoking

Reducing maternal smoking was agreed as a key focus for this priority at the HWB stakeholder event in January 2013. The 2012/13 public health report for Telford & Wrekin re-iterated key messages which emerged through the JSNA, including:

- Maternal smoking rates in Telford & Wrekin remained significantly worse than the national average over the past decade (Figure 1)
- 35% of mothers from the most deprived local communities were smokers at delivery, compared to 11% of mothers from the more affluent areas
- Nearly 40% of women aged under 20 years are still smoking at delivery



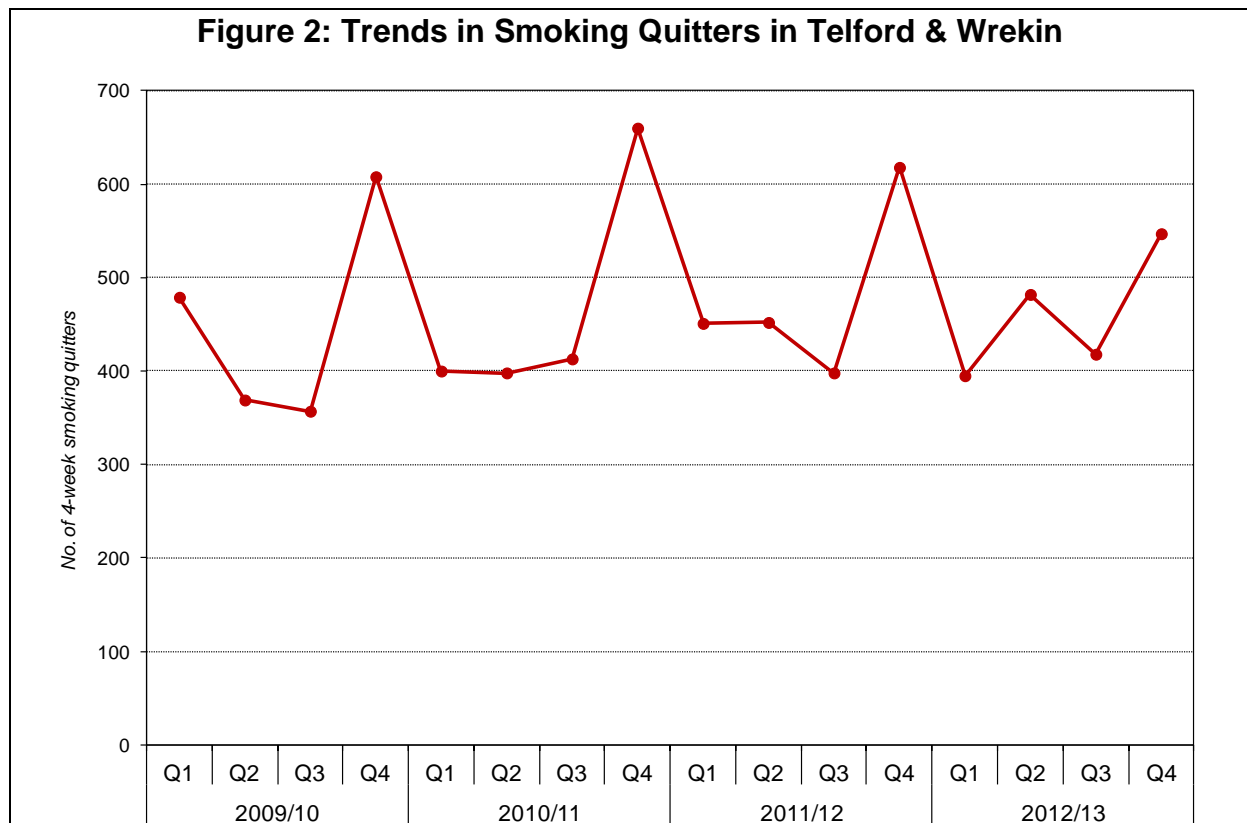
As part of the further development of the health and wellbeing strategy an asset mapping workshop for smoking in pregnancy was held in July 2013. There were 30 participants at the event hosted by Telford & Wrekin Council and Shropshire County Council, including: midwives and a consultant obstetrician from Shrewsbury and Telford NHS Hospitals Trust (SaTH), representatives from Children's Centres, the Shropshire and Staffordshire NHS England Area Team, Homestart, Telford and Wrekin CCG and stop smoking service provider teams. The key areas for further consideration and action were agreed as follows:

- **Preconception and getting pregnant**
  - Risk assessment
  - Robust referral systems
  - Good links with GPs and health professionals
  - Young people champions
  - Targeting final year primary school children with key messages
- **Confirmation and booking**
  - Training for children centre staff and GP receptionists
  - Link to community scanning clinics
  - Improved sharing of smoking at booking data
  - Consistency of booking and monitoring by midwives
  - Robust referral systems with sexual health services
  - Celebration of achieving quitters

- Analyse current datasets
- Better understanding of the mother perspectives
- **Antenatal period**
  - Referrals from the sonographer
  - Improved data capture during pregnancy
  - Updated training for midwifery
  - Healthcare Assistant post in maternity to focus on lifestyle behaviours
  - Working with the whole family
  - Audit of process during scan and midwifery appointments
  - Development of apps and mobile phone technology
  - Involve wider workforce such as pharmacists
- **Delivery**
  - Bounty pack information
  - Smoking policy in SaTH
  - Communication on marketing for second hand smoke
  - Smokefree grounds
  - Opt out system if still smoking at delivery
  - Streamline data capture

#### 1.4 Performance and activity update

The prevalence of smoking amongst adults in Telford & Wrekin is estimated to have reduced from 28% in 2000/02 to 24% in 2010/12. Some of this improvement has been due to the successful stop smoking services which have been in place. The provisional figures for 2012/13 show that 3,597 Telford & Wrekin smokers set a quit date and 1,842 of these remained successfully quit at 4 weeks. This equates to a 51% quit rate, an increase on previous year's performance. There is a recognised seasonal effect for smoking quitters, however the peak usually seen during January-March was not as great in 2013. (Figure 2)



## **1.5 Tobacco Control Partnerships**

The Telford and Wrekin Tobacco Control Network supports and manages the local tobacco control agenda. The network is made up of representatives from the Council and CCG commissioning teams, SaTH clinical leads, stop smoking service providers, the Fire Service, HMRC, and the Council's public protection team. This established group has not met for some time but is due to be re-invigorated and will ultimately become responsible for the development and delivery of the local tobacco control strategy.

Part of the strategy development will involve undertaking the self assessment for the new Ash CLear approach. This excellence framework is specially designed for councils in England as they take on their new responsibilities for tobacco control. The CLear approach will be used as an opportunity to undertake structured reflection across the partnership in Telford & Wrekin. The simple self assessment exercise will allow council leads and partners to review our local action to tackle tobacco. After the assessment, which will be undertaken by the end of December 2013, an improvement report will be produced. This report will highlight strengths and areas for improvement and will contribute to the development of the new strategy by March 2014.

There is also an existing West Midlands Tobacco Control Network made up of the tobacco control commissioners from across the councils within the region. The group reviews best practice, NICE guidance, shares experiences, acts as a reference group and supports each other acknowledging the different areas of expertise. This group meets twice per year as well as working as a real time virtual group. Going forward it is envisaged this network will be coordinated by the PHE West Midlands Centre.

## **2. IMPACT ASSESSMENT – ADDITIONAL INFORMATION**

See summary impact assessment section on pages 2-3 for details.

## **3. PREVIOUS MINUTES**

Health & Wellbeing strategy priority position statement May 2013: reduce the number of people who smoke.

## **4. BACKGROUND PAPERS**

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