

<b>Report to:</b>	<b>Health and Wellbeing Board</b>
<b>Relevant Officer:</b>	Liz Petch, Public Health Specialist
<b>Relevant Cabinet Member</b>	Councillor Collett, Cabinet Member for Public Health
<b>Date of Meeting</b>	22 <sup>nd</sup> October 2014

## TOBACCO CONTROL STRATEGY AND ACTION PLANS 2014-2016

### 1.0 Purpose of the report:

- 1.1 To formally endorse the Tobacco Free Lancashire Strategy 2014 – 2016, be in receipt of the Pan-Lancashire Smoking in Pregnancy Action Plan, and support the adoption of a Blackpool Tobacco Control Strategy and Action Plan 2014 – 2016 as a local tool for taking forward work to reduce the harms of tobacco use.

### 2.0 Recommendation(s):

- 2.1 To endorse the Tobacco Free Lancashire Strategy 2014 – 2016. This pan-Lancashire document has already been agreed by the Lancashire and Blackburn with Darwen Health and Wellbeing Boards.
- 2.2 To be in receipt of the Pan-Lancashire Smoking in Pregnancy Action Plan and agree work to develop local solutions to the actions identified.
- 2.3 To agree that the Blackpool Tobacco Control Strategy and Action Plan 2014 – 2016 focuses on a range of actions across three priority themes as we believe these to be the areas of greatest opportunity where the greatest differences can be made:
  - **Prevention** - creating an environment where (young) people choose not to smoke
  - **Protection** - protecting people from second-hand smoke
  - **Cessation** - helping people to quit smoking

### 3.0 Reasons for recommendation(s):

- 3.1 Whilst figures in other areas of England have seen reductions in the numbers of adults who smoke, in Blackpool the figures have remained static over the last few years at around 29.5% of the adult population smoking as compared to the England

average at 20%. Smoking rates in the most deprived communities in Blackpool remain disproportionately high - 51% in the most deprived areas (e.g. Bloomfield) compared to less than 25% in the least deprived areas (e.g. Anchorsholme). This is a key factor in contributing to Blackpool's persistent health inequalities that result in the unfair differences in life expectancy between the richest and poorest of our communities. People in routine and manual occupations are around twice as likely to smoke as those in managerial and professional occupations. In Blackpool smokers from routine and manual groups comprise 44% of the overall smoking population; reducing smoking in this group is also critical to reducing inequalities in the town.

In addition to national initiatives, legislation and campaigns, locally various steps have been taken which go towards further reducing harm from tobacco within our population. These steps include:

- smoke free hospital and grounds to protect patients and visitors
- signage to encourage smoke free playgrounds and parks to protect our children
- working with midwifery services and pregnant women to reduce the rate of pregnant women smoking at the time of delivery giving babies a better start in life with initiatives including being the first area to introduce Carbon Monoxide monitoring at 36 weeks and a positive opt out referral to stop smoking services
- commissioning a smoking cessation service within GP practices in addition to the Specialist Stop Smoking Service ensuring wider more accessible services for those people wishing to stop smoking
- working closely with colleagues such as Trading Standards on various operations relating to proxy sales of tobacco to children, employing specialist sniffer dogs on illicit and illegal tobacco operations, and operations at Blackpool airport on smuggling
- commissioning a lung health check project to find the 'Missing Millions' – people who may be in the first stages of Chronic Obstructive Pulmonary Disease (COPD) with the aim of giving those people information that would encourage them to seek help to stop smoking
- an in-patient tobacco service at Blackpool Victoria Hospital offering unplanned admission access to NRT during their stay and referral to community services on discharge
- Supported social marketing projects to understand what pregnant need to encourage them to have a smoke free pregnancy and birth (e.g. BUMP magazine)

- Introduced an incentive scheme to encourage women in making a quit attempt

This Strategy builds on work already undertaken and recognises the need for a multi-faceted approach to local work, whilst balancing input and influence on a range of national, regional and sub-regional actions that complement and reinforce each other. Tobacco Free Lancashire is an important and influential forum whereby with work with wider partners to take forward some of this wider work.

In implementing decisive tobacco-control policies, Blackpool Council and our partners must show leadership in responding to the direction of travel set out in this Strategy. However, communities themselves also have a role to play. Whole population approaches such as regulation and investment in services must be supported by interventions which are driven by, and meet the needs of, local communities. We all need to consider, as individuals and communities, what we can do to support each other to make smoking a thing of the past and improve not only our own health but also the health of our local areas. Only by taking this approach can we achieve our ambition of a tobacco-free Blackpool and accelerate our efforts to tackle the underlying causes of health inequalities.

3.2a	Is the recommendation contrary to a plan or strategy adopted or approved by the Council?	No
3.2b	Is the recommendation in accordance with the Council's approved budget?	Yes
3.3	Other alternative options to be considered:	None

Not to endorse the strategy.

#### **4.0 Council Priority:**

4.1	The relevant Council Priority is "improve health and well-being especially for the most disadvantaged".
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#### **5.0 Background Information**

5.1	Effective tobacco control is central to realising the right to life and the right to the highest attainable standard of health for everyone in Blackpool. It recognises that people deserve to live in a town free from the harms caused by tobacco, where people choose not to smoke and enjoy longer, healthier lives.
5.2	The Blackpool Tobacco Control Strategy has been developed with input from the

Blackpool Tobacco Alliance; which includes partners from Lancashire Fire and Rescue, North West Ambulance, Blackpool CCG, Blackpool Teaching Hospitals and local schools and colleges and sets out the next steps on Blackpool's journey to becoming tobacco-free.

5.3 England has come a long way in shifting cultural attitudes to smoking and are now seen as world leaders on tobacco control and smoking cessation. In recent years there has been:

- a ban on direct advertising of tobacco, followed by a ban of tobacco companies sponsoring sporting events and teams, especially Formula 1 from 2005
- the implementation of smoke-free legislation in 2007
- an increase in the age for tobacco sales from 16 to 18 in 2007
- an overhaul of tobacco sale and display law, including legislation to ban automatic tobacco vending machines and a ban on the display of tobacco and smoking-related products in shops at point of sale in large stores and supermarkets which came into force in 2012 and which will be in place for all other shops and stores in 2015
- comprehensive awareness-raising campaigns
- record investment in NHS smoking cessation services helping hundreds of thousands of people to attempt to quit smoking

5.4 Whilst there is clear evidence that action, such as the smoking ban, has led to a range of health benefits including: reduced heart attack admissions to hospital; reduced childhood asthma admissions to hospital; and fewer premature births, smoking still remains one of the most significant public health challenges.

5.5 Smoking is associated with a range of illnesses and is the primary preventable cause of ill health and premature death. Each year, there are over 403 smoking related deaths (around a quarter of all deaths in Blackpool every year) and 2,125 smoking related hospital admissions in Blackpool. Annual costs to Blackpool's health service associated with smoking-related illness are estimated to exceed £7m each year with an additional £744,000 as a result of second hand smoke.

5.6 Does the information submitted include any exempt information? No

5.7 **List of Appendices:**

Appendix 5a Tobacco Free Lancashire Strategy 2014 – 2016

Appendix 5b Pan-Lancashire Smoking in Pregnancy Action Plan

**6.0 Legal considerations:**

6.1 None

**7.0 Human Resources considerations:**

7.1 None

**8.0 Equalities considerations:**

8.1 An Equality Impact Assessment (EIA) has been completed on the Tobacco Free Lancashire Strategy and is available on request. This assessment is currently being considered against Blackpool Tobacco Control Strategy and Action Plan 2014 – 2016.

**9.0 Financial considerations:**

9.1 Blackpool Tobacco Control Alliance currently holds a budget of £45,000 to take forward actions identified in the action plan - we must recognise that although some developments and interventions will be achieved by a different way of working, incorporating work into mainstream activities and in-kind contributions from the Council and its partners, not all work will be cost neutral.

9.2 This budget is held and administered by Blackpool Council Public Health, however all decisions on expenditure need to be agreed by a quorum Alliance meeting.

**10.0 Risk management considerations:**

10.1 None

**11.0 Ethical considerations:**

11.1 None

**12.0 Internal/ External Consultation undertaken:**

12.1 Both the Pan-Lancashire and Blackpool Strategies have multi-agency partnerships in place to ensure the consultation and involvement of relevant stakeholders in this work.

**13.0 Background papers:**

13.1 None

