



# Cabinet Report

Purpose: For Decision

## ISLE OF WIGHT COUNCIL

Date **14 MARCH 2024**

Title **TOWARDS A SMOKEFREE GENERATION: PROCURING THE STOP SMOKING SERVICE AND SIGNING THE LOCAL GOVERNMENT DECLARATION ON TOBACCO CONTROL**

Report of **COUNCILLOR DEBBIE ANDRE, CABINET MEMBER FOR ADULT SOCIAL CARE AND PUBLIC HEALTH**

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### Executive Summary

1. This report outlines plans to sign the Local Government Declaration on Tobacco Control and spend up to maximum amount of £2,547,480 on procuring a new smoking cessation and prevention service considering recent government announcements to create a smokefree generation and make smoking obsolete.
2. The Local Government Declaration on Tobacco Control is a public statement of the Council's commitment to action on tobacco control and to protect residents from the harm caused by smoking. The most effective way to tackle smoking is through a comprehensive, collaborative approach working with partners across the system, which will be led by the Isle of Wight Council.

### Recommendation

3. Cabinet approves the spend of up to a maximum amount of £2,547,480 on procuring a new smoking cessation and prevention service over a period of seven years.
4. Cabinet approves for the Leader of the Council, Chief Executive, and Director of Public Health to sign the Local Government Declaration on Tobacco Control.

### Background

5. The Council, through the public health ringfenced grant, currently commissions a smoking cessation and prevention service (Smokefree Island) that supports over 500 smokers to quit each year and prevents smoking and electronic cigarette uptake in children and young people.
6. Reducing smoking prevalence and preventing smoking among adults and

children is a core part of the public health duties of the Council led by the Director of Public Health. Smoking continues to be the single most preventable cause of ill health and premature death and main driver of health inequalities on the Isle of Wight. Smoking is a major risk factor for many diseases such as lung cancer, respiratory disease (including chronic obstructive pulmonary disease) and heart disease. It is also strongly linked with cancers in other organs, including the lip, mouth, throat, bladder, kidney, stomach, liver, and cervix. Second-hand smoking is a major cause of ill health in children and young people.

7. Smoking is no longer considered a lifestyle choice but a preventable addiction that requires treatment. Effective tobacco control measures can reduce the rates of smoking in the population by preventing uptake in non-smokers and by supporting current smokers to quit. Supporting people to stop smoking directly contributes to improving health and wellbeing. Evidence-based, specialist smoking cessation services are the most effective way to quit.
8. In 2022, it was estimated that 9.5% of the adult residents on the Isle of Wight smoked, with differences in smoking rates by socio-demographic groups, for example rates being higher in routine and manual workers (15.4%) and residents with long term mental health conditions (29.9%). Every year on the Isle of Wight, 612 residents die, and 1,382 residents are admitted to hospital because of smoking. Approximately 9% of pregnant women smoke which has negative health impacts for the mother, baby, and the wider family.
9. Through modelling it is estimated smoking could cost the Isle of Wight economy £114.1m each year, a figure that is broken down into losses in economic productivity (£65.1m), social care costs (£43.9m), healthcare costs (£4.4m) and fire costs (£0.7m).
10. Isle of Wight Council, through its role as the Public Health Authority, leads local action to tackle smoking and youth vaping through convening the Isle of Wight Tobacco Sub-Group, commissioning a community stop smoking service, and working in partnership across the system to embed smoking cessation and prevention. The Council leads a multi-agency Tobacco Control Strategy which agencies have signed up to delivering together, including a focus on electronic cigarette prevention in children and young people.
11. In October 2023, the government announced new grant funding to local authority Directors of Public Health as part of their ambition to create a smokefree generation and make smoking obsolete. This is in line with the duties of the Director of Public Health. Isle of Wight Council's annual allocation of the smokefree generation grant amounts to £169,296 from 06 April 2024 through to 05 April 2029, and should be spent on initiatives to support people to quit smoking. Allocations are based on local smoking rates, contingent on maintaining existing spend on smoking, and it is anticipated that allocations will remain similar each year.

### **Current Service**

12. The current commissioned service offers three tiers of support to provide a programme that meets the needs of smokers:

- Specialist support for smokers who need it and are ready to quit with specialist support (specialist service).
  - Brief support and a stop smoking medicine for those who want help but do not require specialist support.
  - Self-support for those who want to stop but do not want professional support (digital behavioural support via Artificial Intelligence Quit Adviser Bella/support pack).
13. Within the current contracted specialist smoking cessation service performance and quality targets are being achieved for most locally specified key performance indicators and information reporting requirements. The current service engages with twice as many smokers than expected according to national guidance, and the smokefree generation grant allows further service expansion.
14. Alongside the commissioned service, the public health team has a range of programmes which prevent smoking and vaping in non-smokers and supporting smokers to quit. This includes:
- A multi-agency Isle of Wight Tobacco Control Sub-Group that brings partners together to align strategic priorities and provide support, resources, and collaborative working to prevent smoking and vaping and treat tobacco dependence. The work of the group is underpinned by the Isle of Wight Public Health Strategy.
  - Working with schools and colleges on the Isle of Wight to provide resources to teachers, parents, and carers around smoking and vaping.
  - Communication and marketing campaigns that are conducted throughout the year, with many focusing on higher risk groups such as pregnant women and younger people. Local campaigns are designed to amplify national and regional campaigns and work in conjunction with campaigns run by the specialist smoking cessation service.

### **Future Service**

15. The increase in government support through the smokefree generation grant and the funding from the ringfenced public health grant will enable the public health team to procure an expansion of our core smoking cessation offer for a seven year contract.
16. A full procurement will be completed in accordance with the Council's Contract Standing Orders and follow best practice from national guidelines. The service model will be adaptable to changes in prospective funding allocations, changes in smoking prevalence within the Isle of Wight, changes in technology, and changes in the evidence-base around best practice and effective approaches. Future services will continue to provide the most intensive level of support to groups most at risk of smoking related ill health, including people living in areas of greatest deprivation, routine and manual workers, pregnant women, and those with existing ill health. The service alongside the Council will also be

expected to pro-actively market to target demographic groups using insight and market segmentation and provide a user-friendly digital front door as well as other access points to the service.

17. The procurement of this service enables us to review the current service model, build in improvements to the new contract, and expand the service to meet government ambitions to create a smokefree generation. There remains a large cohort of smokers who may find it difficult to engage with current services and it is important understand how to reduce barriers to access, engagement and successful quits.
18. The new seven year stop smoking service will structure around and account for the five years of committed funding from the smokefree generation grant.
19. In addition, we will:
  - Further raise awareness of our specialist service through enhanced communications and marketing campaigns to the public.
  - Continue to deliver smoking prevention and cessation training for all health, care and wider workforce.
  - Use innovative approaches targeted at localities and population groups to drive down smoking rates further.
20. The emergence of electronic cigarette use among youth is of particular concern and the smokefree generation grant enables the provision of continued and additional focus on this area. This includes building on the programme of work with schools and colleges on the Isle of Wight and developing a dedicated service for electronic cigarette cessation among children and young people.
21. The smokefree generation grant also allows for extending the existing programme of work to support smokers to use electronic cigarettes to quit and additionally supporting electronic cigarette users to quit by treating their underlying dependence to nicotine.

### **Service Outcomes**

22. Expected service outcomes will follow both best practice and national reporting requirements. This includes the number of 4-week quitters, currently set at 522 annually but will be increased in light of the smokefree generation grant. At least half of 4-week quitters should expect to remain quit at 12 weeks, and this is a further outcome expected of the service. To target inequalities, other service outcomes include having at least 60% of service users being from priority groups (e.g. long term mental health condition, pregnancy, routine and manual worker).
23. Activity resulting from using the smokefree generation grant will be delivered by a specialist provider and be monitored through existing reporting channels and will include information on the number of smokers setting a quit date and achieving a successful 4 week quit on a quarterly basis.

### **Local Declaration on Tobacco Control**

24. The Local Government Declaration on Tobacco Control is a public commitment to prioritising tobacco control and reducing the harm caused by tobacco use on

the Isle of Wight.

25. The Declaration does not commit the Council to specific policies but to overarching principles on which local action can be taken.
26. Following sign up to the Declaration, Isle of Wight Council will be able to further its leadership of the systems approach to tobacco control, including developing smokefree policies, supporting staff to quit smoking, training frontline staff to deliver smoking cessation support to Isle of Wight residents. Furthermore, with our internal and external collaboration we will further develop additional knowledge and evidence around the impacts of continued smoking on the economy and workplace health through survey and insights work.
27. Signing the Declaration will strengthen the Council's leadership role in encouraging other local strategic partners, including the NHS, education, and social care, to follow suit and push towards a smokefree 2030 and culture-change where smoking becomes obsolete.
28. The Council will expect its local strategic partners to see the benefits of going smokefree and will support them to follow suit. Further expectations from partners include:
  - Advocating for and supporting government plans for a smokefree generation;
  - Committing to take forward the work of the Council's Tobacco Control Sub-Group;
  - Amplifying health awareness messages about smoking to the public through a coordinated communications approach;
  - Investing resources into cost-saving and highly effective tobacco interventions;
  - Working closely with the Council to increase referrals into its community stop smoking service and make use of free training in Very Brief Advice;
  - Aligning activities and outcomes to minimise duplication, adding value to the system, and promoting shared learning;
29. Providing data and intelligence to support local action and reduce health inequalities in smoking.

### **Responding to climate change and enhancing the biosphere**

30. A full assessment of climate change vulnerability was not completed as the initial vulnerability assessment showed that the service is at minimal risk from climate vulnerabilities. However, consideration will be given to ensure that locations of specialist smoking cessation clinics will promote and enable active travel to mitigate carbon risk.

### **Economic Recovery and Reducing Poverty**

31. The smoking prevention and cessation will not contribute directly to economic recovery and reducing poverty, however, as smoking is a major cause of economic inactivity through smoking-attributable ill health, there are likely to be indirect benefits.

## **Impact on Young People and Future Generations**

32. Children who live in households with smokers are often exposed to second-hand smoke which has a detrimental effect on their health. They are also more likely to become smokers, compared with those from non-smoking households.
33. Most smokers start smoking in their teenage years and the earlier they start smoking, the more likely they are to smoke for longer and die prematurely. About two-thirds of adult smokers reported that they took up smoking before the age of 18 and over 80% before the age of 20. Hence there is need to work to prevent the uptake of smoking by young people and also create smokefree communities and households to reduce exposure to second-hand tobacco smoke, and prevent intergenerational transmission of smoking.
34. There has been an increase in electronic cigarette use in young people and this has raised various health, social and environmental issues. Electronic cigarettes are currently recommended as a quit aid for smokers however, children and young people should not vape. Both tobacco and vape products are age restricted, and it is illegal to sell them to a person under 18 or proxy purchases for anyone under 18. Hence programs of work aimed at restricting access to tobacco products (including vapes) and prevention of smoking and vaping in young people are a key part of the tobacco control programs.

## **Corporate Aims**

35. The plans are in line with the Isle of Wight Health and Wellbeing Strategy 2022-27 and corporate strategy.

## **Consultation and Engagement**

36. The plans have been informed by the Isle of Wight Tobacco Control Sub-Group, client feedback and ongoing insights work with local residents.
37. There will be a positive impact for people with serious mental health conditions, people during pregnancy and maternity, people living in poverty and those in the most deprived communities across the Isle of Wight. This should help reduce health inequalities. There will be no negative impacts on people with protected characteristics.
38. The service will focus delivery in the most deprived communities across the Isle of Wight where smoking rates are highest. This should help more people to get the benefits from stopping smoking and consequently reduce health inequalities. More people stopping smoking in these areas will further embed a non-smoking culture in communities, resulting in a break in the cycle of smoking across generations, helping to make smoking obsolete.

## **Financial / Budget Implications**

39. Smoking cessation and prevention services are currently funded through the ringfenced public health grant and will be additionally funded by the ringfenced smokefree generation grant from 06 April 2024. It is proposed that the

maximum spend would be £2,547,480 over the term of the seven years.

40. Isle of Wight Council's additional annual allocation of the smokefree generation Grant amounts to £169,296 per year for five years from 06 April 2024 to 05 April 2029. Allocations are based on local smoking rates, and it is anticipated that allocations will remain similar each year. Isle of Wight Council's annual allocation of the ringfenced public health grant assigned to smoking accounts to £203,000 per year.
41. The new seven year stop smoking service will financially structure around and account for the five years of committed funding from the smokefree generation grant (e.g. structured as a five year contract with the option of two additional years, primarily with activity-based payment mechanisms). As smoking rates are falling on the Isle of Wight, there will be less demand for the service over time.
42. The request for approval to spend up to a maximum amount of £2,547,480 over a period of seven years does not include the effects of inflation that may be applied to future allocations or any change in allocation to the ringfenced public health grant or the smokefree generation grant. It is requested that approvals for additional spend resulting from inflation uplifts applied to future allocations or changes to future allocations over the seven-year period are delegated to the Director of Public Health.
43. There are no financial commitments to signing the Declaration. A small amount of Council Officer time will be required to include the Declaration within Corporate policies. There is no cost attached to membership of the Smokefree Action Coalition, a group of over 300 organisations across the UK committed to ending smoking and to which the Council will be eligible to join on signing on the Declaration.

## **Legal Implications**

44. There are no legal implications from signing the Local Government Declaration on Tobacco Control as these are a set of principles and do not override any existing policies or procedures.
45. Legal advice has been sought from the Isle of Wight procurement team in the development of the new smoking cessation and prevention service, will be complete in accordance with the Council's procurement procedures and follow best practice from national guidelines.

## **Equality and Diversity**

46. There will be a positive impact for people with serious mental health conditions, people during pregnancy and maternity, people living in poverty and those in the most deprived communities across the Isle of Wight. This should help reduce health inequalities. There will be no negative impacts on people with protected characteristics.
47. The service will focus delivery in the most deprived communities across the Isle of Wight where smoking rates are highest. This should help more people to get

the benefits from stopping smoking and consequently reduce health inequalities. More people stopping smoking in these areas will further embed a non-smoking culture in communities, resulting in a break in the cycle of smoking across generations, helping to make smoking obsolete.

48. A full Equalities Impact Assessment is in progress.

## **Risk Management**

49. A risk assessment and log have been completed as part of the ongoing work of the Isle of Wight Public Health Team. Three key risks associated with this decision include:
- (a) If Cabinet does not approve spend on a new smoking cessation and prevention service, then the Council will not be eligible to receive the smokefree generation grant which will place a resource constraint on our tobacco control ambitions.
  - (b) If Cabinet does not approve spend on a new smoking cessation and prevention service, then the Director of Public Health will be unable to fulfil a core public health duty which will result in widened health inequalities and poorer population health.
  - (c) If Cabinet does not approve to sign the Declaration, then the Council will be less reputable in its tobacco control systems leadership.

## **Appendices Attached**

50. Appendix 1 - Local Government Declaration on Tobacco Control

Contact Point: Simon Bryant, Director of Public Health; [simon.bryant@hants.gov.uk](mailto:simon.bryant@hants.gov.uk)

SIMON BRYANT  
*Director of Public Health*

COUNCILLOR DEBBIE ANDRE  
*Cabinet Member for Adult Social Care  
and Public Health*