

READING HEALTH AND WELLBEING BOARD

DATE OF MEETING:	8 October 2021		
REPORT TITLE:	Stop Smoking Service and E-cigarette Position Statement		
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1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 The purpose of this report is to provide an overview of the new Berkshire West Stop Smoking Service which commences on 1st October 2021. The report sets out the context for commissioning this service as part of the wider system approach to Tobacco Control, the key features of the new service model and the plans being developed to ensure the service is aligned with the new NHS Tobacco Dependency Treatment services currently being developed.
- 1.2 The report also includes a description of the recent position statement on e-cigarettes, produced by the South East Association of Directors of Public Health, which is relevant to all services that provide support to people wishing to quit smoking.
- 1.3 Appendices:
 - A. Delayed Procurement Committee Report;
 - B. Waiver RBCW043;
 - C. Officer Decision Form;
 - D. South East Directors of Public Health E-Cigarette Position Statement
 - E. Climate Impact Assessment

2. RECOMMENDED ACTION

- 2.1 ***To NOTE the new Berkshire West Stop Smoking Service and the South East Association of Directors of Public Health Position Statement on E-Cigarettes***

3. POLICY CONTEXT

- 3.1 The principle of jointly commissioning for Public Health services had been previously agreed by the three Chief Executives across all three local authorities in Berkshire West in 2019. To that end, the commissioning of the next iteration of the Stop Smoking Service contract was carried out jointly, in partnership with the other two Councils in the Berkshire West area.

3.2 The authority to enter Reading Borough Council into a contract for the Stop Smoking Service is delegated within the Council's constitution to the Director of Adult Care and Health Services.

4. THE PROPOSAL

4.1 Current Position

4.1.1 The Stop Smoking Service within the wider context of Tobacco Control

Reducing the number of people who smoke requires a stop smoking service and all other public sector organisations taking action in partnership, as part of a system wide approach.

The tobacco control plan for England launched in 2017 sets out the government ambition for England to be smokefree by 2030, with public sector organisations working together to:

- Reduce the prevalence of 15 year olds who regularly smoke from 8% to 3% or less
- Reduce smoking prevalence amongst 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.

The Berkshire West Tobacco Control Plan 2021-23 sets out the local delivery plan to support these national ambitions and formalises the commitments of partners to work together to reduce the impact of tobacco on individuals and communities.

In August 2021, a new allocation of funding was made to Berkshire West for Tobacco Dependency Treatment, as part of the NHS Long Term Plan.

The new funding will enable tobacco control work to be carried out in maternity and acute inpatient settings at the Royal Berkshire Hospital and in mental health inpatient settings at Berkshire Healthcare NHS Foundation Trust. A delivery plan and baseline review in acute inpatient settings is underway and delivery plans for tobacco dependence are also being developed for maternity and mental health inpatients for 2021/22.

The delivery plans represent a vital step on the road to both NHS Trusts becoming fully smokefree. Health professionals in the Trusts will be trained to deliver 1st level stop smoking brief advice and 2nd level behavioural support with nicotine replacement therapy (as required) to patients, thus increasing the opportunities available to help even more people quit smoking.

Robust referral pathways and close working relationships between the new service provision in the Trusts and the community Stop Smoking Service are being developed. Referral pathways will need to be clearly communicated to all stakeholders, especially GPs and pharmacies, as well as service users and the general public.

4.1.2 Procurement of the new Berkshire West Stop Smoking Service

The contract for the new Berkshire West Stop Smoking Service was due to be in place with effect from 1st April 2021, with procurement starting in early 2020. Owing to the impact of Covid-19 on both commissioners' and potential providers' capabilities to engage with a major procurement exercise, the Director of Adult Social Care & Health, in consultation with the Lead Councillor for Health, Wellbeing & Sport, decided to delay the procurement of the Berkshire West Stop Smoking Service for up to 12 months and to extend the current contract to 31st March 2022. (A)

A Waiver of Contract Procurement Rules (Ref RBCW043) (B) was approved in November 2020 and an Officer Decision (C) to make a Direct Award to Solutions4Health, the incumbent provider, was made on 29th January 2021. The Direct Award was for an initial period of six months (from April

- September 2021), with an option to extend by a further six months (from October - March 2022), in the event of any unanticipated further delays in procurement.

The ITT for the Berkshire West Stop Smoking Service contract went out to advert in December 2020. The annual contract value is £100,000 for each of the three local authorities (in total £300,000 across Berkshire West). The contract duration is for three years, with an option to extend by a further two years.

Informal conversations with interested providers to test the market for the service took place in February 2021.

As a result of the ITT, two bids were received. The winning bid was submitted by the incumbent provider, Solutions4Health, who scored highest on both quality and price.

4.1.3 The South East Association of Directors of Public Health (SE ADsPH) Position Statement on E-Cigarettes (D)

The SE ADsPH position statement on e-cigarettes was produced in Spring 2021. Its aims are to:-

- Provide a South East public health consensus on e-cigarettes.
- Help organisations develop their own policies and practice which follow a similar approach and unify communication messages to the public on the promotion and advice on e-cigarettes.
- Provide smokers of tobacco across the South East region with the information to make an informed decision about any associated risks of e-cigarettes to their health and offer advice on a viable harm reduction option.
- Steer through the latest evidence, best practice guidance, the relevant regulations and summarises the key communication messages

The Statement reports that e-cigarettes are now the most popular aid to quitting smoking in England, with research showing that using an e-cigarette, along with behavioural support, can be twice as effective for quitting smoking compared to using nicotine replacement therapy (NRT), such as patches, gum and spray, at one-year follow-up.

E-cigarettes are far less harmful than smoked tobacco. Nevertheless, there are misconceptions among a large proportion of the public that e-cigarettes are equally as, or more harmful than, smoking and has led to health and social care professionals delivering variable advice in relation to the products.

The Statement goes on to make clear that based on the latest evidence available, while not risk free, e-cigarettes carry a fraction of the risk of tobacco smoking. In response to some concerns in the media that e-cigarettes were acting as a “gateway” to smoking, the public health consensus is that there is little, if any, evidence (at least in the UK) that young people or non-smokers are becoming addicted to nicotine or introduced to smoking through use of e-cigarettes. This evidence is borne out by data reported from 2020, that shows only 0.3% of people who have never smoked are current e-cigarette users.

4.2 Options Proposed

N/A

4.3 Other Options Considered

N/A

5. CONTRIBUTION TO READING'S HEALTH AND WELLBEING STRATEGIC AIMS

5.1 Whilst the proportion of the population who smoke tobacco has fallen, tobacco smoking still remains the leading cause of premature death, killing 74,500 people in England in 2019. In Reading, whilst the prevalence of adult smoking in 2019 was similar to the England average at 13.9% (Fingertips, accessed 10 September 21), this figure masks significant inequalities amongst population groups.

5.2 Smoking contributes to substantially to health inequalities, accounting for approximately half of the difference in life expectancy between the lowest and highest income groups. Harm from smoking is concentrated in our most disadvantaged communities (Department of Health [DH], 2011; Public Health England [PHE], 2019a).¹ Stop smoking services can contribute to reducing these health inequalities (National Centre for Smoking Cessation Training [NCSCT], 2013).

5.3 **The Stop Smoking Service directly contributes to Reading's Health and Wellbeing Strategy priority 1: Supporting people to make healthy lifestyle choices (with a focus on tooth decay, obesity, physical activity and smoking).**

5.3.1 The new Berkshire West Stop Smoking Service will operate with effect from 1 October 2021.

In the light of the literature review carried out as part of the Stop Smoking Service Health Needs Assessment, a new service model has been developed. The provider will operate a tiered service model so that the support offered to people can be more personalised, taking into account their needs and preferences.

5.3.2 The tiered model of service will comprise three levels of intervention, each underpinned by evidence-based smoking cessation support.

- Level 1 is digital based information and support for those who want to quit on their own. It includes clinical assessment and the person is routed to the most appropriate level of support according to their level of dependence.
- Level 2 is brief advice and pharmacotherapy (NRT). The person receives a minimum of 1 30 min session and their smoking status is assessed at 4 weeks. Smoking status will be validated by CO monitor.
- Level 3 is specialist stop smoking support. The smoker will receive a minimum of a weekly session for six weeks and their smoking status is assessed at 4 and 12 weeks. Smoking status will be validated by CO monitor at 4 and 12 weeks.

5.3.3 People will be able to self-refer or be referred by other agencies, such as their GP. All people wishing to quit will be triaged to understand their level of nicotine dependence and in discussion with an advisor, they will be routed to the appropriate level of support. The full range of options will be explained, along with the likelihood of a successful quit and the commitment required at each level of intervention.

5.3.4 People who are unsuccessful at quitting smoking will be able to re-enter the Service at the same or a different level of intervention.

5.3.5 The Service will be available to all people in Reading, West Berkshire and Wokingham who wish to quit smoking. However, the Service will also target specific priority groups identified by the needs assessment as being at high risk of tobacco-related harm:-

- Routine and manual workers
- Pregnant women who smoke (including cohabitants)*

¹ Stop Smoking Service Needs Assessment, 2020

- People diagnosed with a long term mental health condition*
- Individuals receiving treatment from substance misuse services
- People currently admitted to secondary care acute settings* and/or living with one or more specific
- long-term conditions
- Children and young people under 18 years
- Individuals from minority ethnic groups

* Also target groups for the NHS LTP Tobacco Dependence Treatment funding. Service is already involved with discussions to ensure there are clear pathways for patients returning to stop smoking support in the community, if required.

Smokers in priority groups will be strongly encouraged to enter at Level 3 and their progress assessed up to 12 weeks.

5.3.6 The Service will offer the full range of pharmacotherapy (NRT) and will be e-cigarette friendly. (NB: note the Service is currently unable to offer Champix (varenicline), due to a national shortage of the product. Smokers are being offered the recommended alternatives of pharmacotherapy plus behavioural support).

5.3.7 The Service will operate 7 days per week, 52 weeks per year (excl. bank holidays), daytime, evenings and weekends.

5.4 The proposal recognises that plans in support of Reading's 2017-20 Health and Wellbeing Strategy should be built on three foundations - safeguarding vulnerable adults and children, recognising and supporting all carers, and high quality co-ordinated information to support wellbeing. The proposal specifically addresses these in the following ways:

5.4.1 Safeguarding vulnerable adults and children.

All new staff in the Stop Smoking Service are required to undertake mandatory safeguarding training and staff are trained to level 1, 2 or 3, appropriate to their role in the organisation. The Service has clear internal processes for communicating safeguarding concerns, with escalation as required to the Director of Nursing and Safeguarding and the Executive Director of Safeguarding. The Director of Nursing and Safeguarding is a member of both Adult and Children Safeguarding Partnership Boards and subgroups. The Service has a Safeguarding Policy that is reviewed annually. Stop Smoking Advisors received ongoing safeguarding supervision with weekly drop-in virtual clinics.

5.4.2 Recognising and supporting all carers

Whilst the Health Needs Assessment did not identify carers as being at greater risk of harm from tobacco than the general population, the new tiered model for the Stop Smoking Service offers improved flexibility and choice for those who wish to quit smoking. As such carers' preferences and needs for accessing support on days, at times and in ways that suit them will be supported.

5.4.3 High quality co-ordinated information to support wellbeing

The Service maintains detailed client records that capture information on each stage of their treatment, their motivation, quit history, and the outcome of their intervention (whether or not a successful quit has been achieved).

The Stop Smoking Service will be required to report activity and outcomes to commissioners on a quarterly basis and will be audited annually. This will enable commissioners to closely monitor the impact of the new tiered model in terms of numbers of people who are quit at 4 weeks and 12 weeks and the quality of the service.

6. ENVIRONMENTAL AND CLIMATE IMPLICATIONS

- 6.1 The Council declared a Climate Emergency at its meeting on 26 February 2019 (Minute 48 refers).
- 6.2 Climate Impact Assessment Tool outcome was Net High Positive impact (*E*). The impact of Stop Smoking Advisor travel on emissions will be managed by use of public transport, provision of telephone support and posting out of Nicotine Replacement Therapy. There may be a supply chain disruption for NRT nationally due to transportation issues that are outside the control of the Service.

7. COMMUNITY & STAKEHOLDER ENGAGEMENT

- 7.1 Not applicable.
Community and stakeholder engagement took place as part of developing the Berkshire West Stop Smoking Service Health Needs Assessment and their views taken into account in the procurement process.

8. EQUALITY IMPACT ASSESSMENT

- 8.1 Not applicable.
The need to carry out an Equality Impact Assessment was considered at the outset, when developing the Health Needs Assessment and the new service specification. It was judged that an EIA was not required, as the proposal to recommission a new service using the tiered model, did not materially affect the nature of the Stop Smoking Service. It is also the case that the new tiered model will offer all those who wish to quit smoking even greater flexibility and choice, based on individual preferences and needs. The continued focus of the Stop Smoking Service on groups who are at high risk of tobacco harms (see 5.3.5) further ensures their particular needs will be continue to be prioritised.

9. LEGAL IMPLICATIONS

- 9.1 Not applicable.

10. FINANCIAL IMPLICATIONS

- 10.1 Not applicable.

11. BACKGROUND PAPERS

- 11.1 A. Delayed Procurement Committee Report;
B. Waiver RBCW043;
C. Officer Decision Form;
D. South East Directors of Public Health E-Cigarette Position Statement
E. Climate Impact Assessment