

All opportunities for development along with proposed approach to respond

These are taken from the CLear peer assessment report

Theme	Recommendation	Proposed approach to respond	Comments and contributions from partners in the TCA
Strategy & performance	<p>1. You have an opportunity, thorough the Health and Wellbeing Board and other groups, to influence understanding of the way tackling tobacco can impact on other priorities (e.g. inequalities, economic growth). However, key strategic documents are disconnected. You may consider tobacco-specific reports in order to ensure the importance of the topic is not lost.</p>	<ul style="list-style-type: none"> Annual? report on Tobacco to HWB Integrate TCA dashboard into the corporate reporting systems for key partner organisations 	<p>General Ideas Benefits map Step by Step Goals should be set collectively Trading standards and other parts of the strategy could amplify each other's work. News feeds: Promotional cases</p> <p>Offers Trading Standards - Case studies for Tobacco and alcohol control Public Health – can bring report SPU – Dashboard on pentana can be shared with team Doncaster partners</p> <p>Help Needed Case Studies and information to bring to life Test purchases with cigarettes and trading standards</p>
Strategy & performance	<p>2. There are opportunities to ensure a wider ownership of the strategic goals (both by individuals and organisations) and to strengthen the governance arrangements for monitoring progress. A starting point may be to review the strategy itself.</p>	<ul style="list-style-type: none"> Update (rather than revise?) overall strategy including goals and interim goals As part of this, invite leadership from different partners for different aspects of the strategy – perhaps through champions 	<p>Ideas Programme management needs to be more robust Sponsors – specifically Director of Public Health?</p>
Strategy & performance	<p>3. In particular you should revise the vision of 'reducing nicotine dependence' which</p>	<ul style="list-style-type: none"> Can be reviewed in the revised strategy 	

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	contradicts your open view of electronic cigarettes.		
Strategy & performance	4. You appear to concentrate on secondary prevention. Consideration should be given to broadening the scope of tobacco control activities to incorporate local elements of the MPOWER six-strands of comprehensive tobacco control. https://www.who.int/tobacco/mpower/en/	<ul style="list-style-type: none"> Review the relative weight given to different aspects of MPOWER as part of strategy update 	<p>Ideas Physical activity especially race for life etc</p> <p>Offer Feedback on health promotion events evaluation (Smoking in pregnancy)</p>
Strategy & performance AND Leadership and partnership	5. There is an opportunity to further encourage the development of tobacco control champions from partner organisations and opportunities to increase understanding in partner organisations on which policy levers and interventions will be most impactful on their priorities (e.g. CCG)	<ul style="list-style-type: none"> Develop champions in each organisation (not necessarily the same as the people attending TCA) Hold a series of discussions with each partner as part of updating the strategy 	<p>Ideas Targeting meetings – workshop style Leadership within different organisations. Scott Crosby attends the TCA Cllrs invited to attend TCA Directory of all TCA members or champions for all TCA to speak to each other/ More clarity on what a champion's role is.</p> <p>Offers Trading standards – post codes for mapping intel on seizures.</p> <p>Help Trading standards – need intelligence on underage sales from agencies.</p>
Strategy & performance	6. The current targets within the tobacco control strategy are unrealistic and as we get nearer to the critical dates consideration should be given to how expectations of elected members and	As part of updating the strategy: <ul style="list-style-type: none"> develop interim targets review the deadlines for the overall targets (potentially extending them) 	

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	<p>partners can be managed to avoid the positive progress made being discredited. Your intention to schedule discussions with partners to identify gaps and how to narrow them will help to make your tobacco control plan more realistic and achievable.</p>	<ul style="list-style-type: none"> • identify what it would take to reach the targets 	
Strategy & performance	<p>7. In order to aid monitoring of progress you may wish to develop interim actions and ensure outputs from the alliance are measurable.</p>	See above	
Strategy & performance	<p>8. You may consider modelling potential outcomes as part of the process of setting new interim targets.</p>	See above	
Leadership and partnership	<p>9. The alliance needs to be clearer about its purpose and perhaps give more direction as opposed to passive receipt of progress updates. Consideration should also be given to whether a change in chair, perhaps an elected member, might provide a degree of independence and scrutiny to the Alliance. The selection of the chair of a reinvigorated alliance may determine how others perceive the group.</p>	<ul style="list-style-type: none"> • Review ToR for TCA including membership and chairing • Consider splitting the meeting in two to have: <ul style="list-style-type: none"> ○ a short business / general section for urgent matters arising and ongoing monitoring ○ a longer workshop section focused on a theme from the strategy / action plan that requires more concerted partnership efforts – this could involve inviting national / regional VCF and other partners for specific elements of work 	
	<p>10. The corporate plan and other high-level documents have little or no mention of tobacco control ambitions but there are various elements to which tobacco control might play a positive role. Consideration</p>		

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	<p>should be given to re-making the case for tobacco control to internal and external partners. These can be framed as 'business' decisions for increased productivity and/or reduced costs as opposed to purely health improvement.</p>		
Strategy & performance	<p>11. The Director of Public Health and relevant elected members could be key influencers to revitalise partnership working on tobacco control, but they may have limitations on their time. A revised comprehensive tobacco control plan linked to corporate objectives may help keep tobacco on relevant agendas.</p>	<p>As above: updated strategy and integrate dashboard into corporate reporting systems</p>	
Leadership and partnership	<p>12. Elected members may wish to make use of the new Councillors' network as part of the LGA Declaration on tobacco control resources.</p>	<ul style="list-style-type: none"> Elected members to consider joining new Cllrs network 	
Leadership and partnership	<p>13. Understanding of the potential issue of tobacco industry interference was strong. It may be helpful to develop a deeper understanding and awareness of the tobacco industry amongst a broader group of elected members and wider stakeholders. This would support framing tobacco control activities around a childhood protection and prevention focus and help increase support for future actions.</p>	<ul style="list-style-type: none"> Develop and run a briefing session for elected members And for other key stakeholders (ask partners which stakeholders to include) 	
Leadership and partnership	<p>14. You have a strong public health team supported by a number of other partners who, if the available time devoted to tobacco control is not reduced, could make considerable progress on a revised plan. At this critical point in time you may wish to designate responsibility for revising the</p>	<ul style="list-style-type: none"> Public health team to consider approaches to co-ordination 	

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	plan and working more widely on smokefree Doncaster to a full-time post.		
Strategy & performance	15. You may wish to consider commissioning a new tobacco control JSNA and linking it to the Health and Wellbeing Board and other key groups.	<ul style="list-style-type: none"> Consider when to update TC JSNA (perhaps focus on updated strategy now, then fully revised strategy following JSNA?) 	
Leadership and partnership	16. Careful consideration should be given to which other organisations and individuals would be essential for a viable alliance and to actively seek their support and attendance.	As above: review ToR for TCA	
Strategy & performance AND Leadership and partnership	17. There is an opportunity to capitalise on and develop tobacco control champions from partner organisations to increase understanding in partner organisations on which policy levers and interventions will be most impactful for themselves and the tobacco control agenda in general.	As above: champions and discussions with partners	
Communications	18. The impact of a 'holistic' public health approach to communications is difficult to measure. In addition, there is currently no partnership communications plan for tobacco control. Consideration should be given to the development of a comprehensive communications plan for the alliance which would allow for greater notice of events and campaigns and enable partners to use their respective resources to support each other.	<ul style="list-style-type: none"> Development of a TCA wide communications plan – initially proactive activity to be focused on smoke-free Doncaster plan, with reactive / amplification work to be considered for national and regional campaigns 	
Communications	19. All partners could review their online communications around tobacco control to ensure quick and easy wins were being realised.	As above: comms plan	
Communications	20. You may wish to consider introducing a local campaign to target specific groups or areas.	As above: comms plan	

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Communications	21. There is an opportunity to further use insights to determine prevailing attitudes and knowledge of smokers and other audiences . This may help guide activity.	As above: comms plan	
Strategy & performance AND Leadership and partnership	22. The QUIT and other programmes show promise and there is a real opportunity to support a concerted effort to embed a smokefree NHS regime that supports in patients to abstain and quit. This could be extended to primary care settings .	<ul style="list-style-type: none"> Development of smoke-free NHS approach with primary care 	
Strategy & performance	23. Training on VBA has been undertaken in many settings, but it was not clear what the outcomes are. You may wish to evaluate these programmes to ensure that you are receiving a reasonable return on your investment.	We are already checking on some of this – perhaps we need to incorporate into the updated strategy?	
Leadership and partnership AND Smoke-free	24. As part of a smokefree Doncaster vision there may be opportunities to work more closely with businesses , especially those with routine and manual workers to promote smokefree businesses and the benefits of a reduced prevalence workforce and tackle inequalities.	<ul style="list-style-type: none"> Incorporate this into plans for smoke-free Doncaster 	
Leadership and partnership	25. The CLear process provides an opportunity to review all public sector smoking policies to ensure they are consistent with the latest evidence regarding electronic cigarettes and include more active support for those wishing to quit .		
Stop smoking service	26. Consideration should be given to removing any barriers to receiving stop smoking medication for those making a quit attempt (e.g. people who do not qualify for free prescriptions).	Could be reviewed through strategy update, however, given that we are also advised to consider balance of spend – towards more preventative activity, are there ways of doing this that are no/low cost?	Contribution SWYFT has purchased medication which is available at drop off sites

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		e.g. what role could vaping play here? CRUK have evaluated pilots of partnerships with vape shops (where staff have undergone training in supporting people to quit)	
Smoking in Pregnancy service	27. Consideration could be given to a limited application of incentive schemes where this would have an impact on inequalities (e.g. smoking in pregnancy).		
Strategy & performance AND Leadership and partnership	28. The stop smoking service is largely following best practice guidance and is responsive to the need to adapt and change practice. There are opportunities for partner organisations to support the service in increasing referrals specifically primary care.	As above: development of smoke-free NHS approach with primary care	
Leadership and partnership	29. There are specific opportunities for more systematic and robust referral pathways from acute health trusts into the local support to quit service as part of the drive towards a smokefree NHS.	Ongoing work on QUIT	
Leadership and partnership AND Smoke-free	30. Action could be taken that would engage more with local communities, perhaps through the voluntary sector , regarding the ambition to create more smokefree outdoor areas . You may wish to prioritise tackling the high levels of smoking outside the local college.	<ul style="list-style-type: none"> Consider VCF as part of update of strategy and ToR on TCA Consider as part of Smoke-free proposals 	<p>Ideas Can businesses make vaping not smoking Switch messages and focus on vaping to switch Prioritise target group eg R&M CYP</p> <p>Help Need help accessing big employers especially R&M workers</p>
Leadership and partnership	31. The use of the CLear peer assessment in a local networking event may help to maintain focus and provide opportunities to explore joint working and the formation	A workshop approach in TCA building on these recommendations is an initial response to this	

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	<p>of a new tobacco control alliance. This may lead to the use of other CLearR tools.</p>	<p>Followed by (as above) briefings and sessions with elected members and key partners</p>	
Training	<p>32. The accredited ‘positive approaches’ course could be useful for a number of professions who are working with the public.</p>	<p>This is the work the Fire Service do – how could this be applied in other settings?</p>	<p>Commissioned Northern College to support staff to have positive conversations, 60 staff trained, within the Safe and Well home safety checks.</p>
Strategy & performance AND Leadership and partnership	<p>33. Consideration should be given to the recommendations of the RCP report ‘Hiding in Plain Sight’ (June 2018).</p>	<p>Could hold a TCA workshop focused on this? Consider as part of strategy update</p>	
Leadership and partnership	<p>34. There are examples of working across boundaries. Doncaster could take a more active role in regional and sub-regional groups and by doing so share good practice.</p>	<p>Consider as part of co-ordinator role</p>	
Young people’s stop smoking service	<p>35. Investigation into how young smokers are identified and worked with by youth services could result in greater opportunities for them to quit.</p>	<p>PH CYP theme lead is investigating this</p>	<p>Ideas Mentor Adepis – behaviour change approach suitable evidence based. Specific and separate campaign for young people. Vaping complex issue: need to be about our line and stick to it. Vaping for Young People is a different issue. Need some creative approaches: e.g. one area distributed sheep (with the intention of them being stolen) or traffic-cones with smoke free messages</p>
Strategy & performance AND Leadership and partnership	<p>36. Consideration should be given to how, in the light of tight budgets, to fund the changes needed to achieve your ambitions.</p>	<p>TCA as a whole to consider this</p>	