



## Report

---

Date: 13<sup>th</sup> March 2024

To: Cabinet

Report Title: Stopping the Start: Smokefree Generation plan and funding

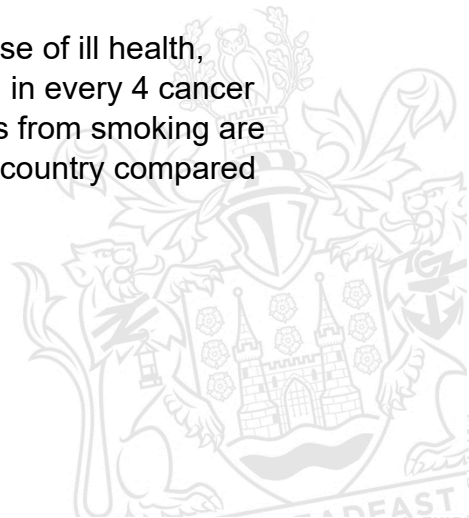
Relevant Cabinet Member(s)	Wards Affected	Key Decision?
Cllr Nigel Ball	All	Yes

### EXECUTIVE SUMMARY

1. This report provides an overview of the recently published policy paper “Stopping the Start: Our new plan to create a smokefree generation”<sup>i</sup> which lays out the route for addressing the harms of tobacco addiction by supporting smokers to quit, prevent addiction to smoking before it starts, curb the rise of vaping in children and young people and the proposed funding of £499,326.00 per annum over five years to reduce smoking prevalence.
2. This report seeks approval to accept funding from the Department of Health and Social Care (DHSC) for the City of Doncaster Council to develop and deliver a programme of activities to reduce tobacco use and associated harms and prevent uptake of smoking over the five year funding period.
3. City of Doncaster Council currently receive funding to provide local stop smoking services and support through the public health grant, the new funding is in addition to that and will be provided through a new section 31 grant on top of the current public health grant allocations. The funding allocation has been calculated using local smoking prevalence data and must be invested in smoking cessation work whilst maintaining current local investment in cessation services.

### The health risks of tobacco

4. Tobacco is the single most important entirely preventable cause of ill health, disability and death in this country and is the direct cause of 1 in every 4 cancer deaths, leading to 64,000 deaths per year in England. Deaths from smoking are more than two times higher in the most deprived areas of the country compared

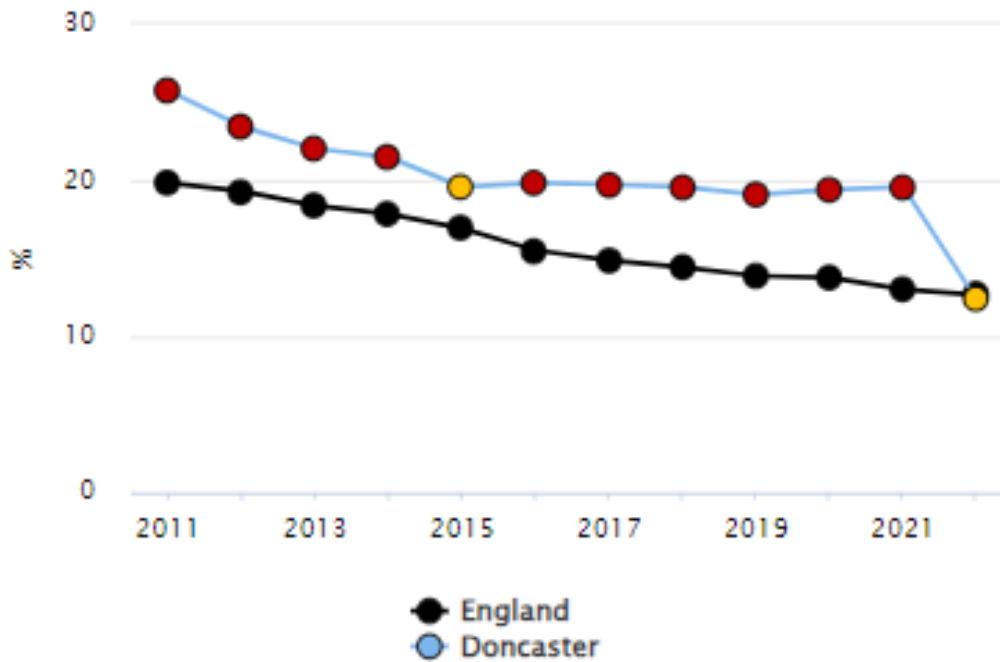


with the most affluent. No other consumer product kills up to two thirds of its users.

5. Smoking is highly addictive, with 4 in every 5 smokers starting before the age of 20 and remaining addicted for the rest of their lives. Addiction means people often want to quit but can't. Their freedom of choice has been taken away, causing harm to the individual and those around them, for example, through passive smoking or smoking in pregnancy. It is a major risk factor for poor maternal and infant outcomes, significantly increasing the chances of stillbirth and can trigger asthma in children.
6. Smoking leads to people needing care and support on average a decade earlier than they would have otherwise, often while still of working age. Smokers lose an average of ten years life expectancy, or around one year for every four smoking years.

## **Local Data**

7. The latest published data (2022) from the Office for Health Improvement and Disparities (OHID) and the Office for National Statistics (ONS) describes a significant reduction in the number of smokers in Doncaster over a 12 month period from a consistent prevalence of around 19.6% to 12.4% (see graph below). According to this data, approximately 30,200 Doncaster residents aged 18 and over smoke tobacco. This data comes from an annual national survey that includes responses from a relatively small number of Doncaster residents. There is a strong chance that the 12.4% prevalence reported more recently does not provide an accurate picture for Doncaster. Because of this, the financial allocation for Doncaster is based on three year rolling average data for smoking prevalence.
8. Until recently, smoking rates in Doncaster remained static over the last 7 years. Despite the local smoking cessation services achieving quits, an equivalent number of people were starting to smoke and becoming addicted to tobacco each year. This was compared with reductions in smoking prevalence in other areas within South Yorkshire.
9. Caution should be applied when interpreting the national data for 2022, this may not provide an accurate baseline to track effectiveness of services and initiatives beyond 2022. The next annual data release in autumn 2024 will help us to understand whether there has been any legitimate shift in smoking prevalence in Doncaster. Work will therefore continue locally to reduce the number of smokers in Doncaster, to fulfil our local ambition to become smokefree (5% prevalence or less) by 2030.



Area	Recent Trend	Count	Value	95% Lower CI	95% Upper CI
England	-	-	12.7	12.3	13.0
Yorkshire and the Humber region	-	-	13.1	12.2	14.0
North East Lincolnshire	-	-	21.8	16.5	27.1
Kingston upon Hull	-	-	18.9	14.3	23.5
Barnsley	-	-	15.8	12.1	19.6
Bradford	-	-	15.6	12.2	19.1
North Lincolnshire	-	-	15.4	11.7	19.1
Rotherham	-	-	14.0	10.2	17.9
Kirklees	-	-	13.4	10.1	16.7
Wakefield	-	-	12.5	9.5	15.5
Leeds	-	-	12.4	9.4	15.4
Doncaster	-	-	12.4	8.9	15.8
Sheffield	-	-	12.0	9.2	14.9
Calderdale	-	-	11.5	8.4	14.6
East Riding of Yorkshire	-	-	10.2	6.8	13.7
North Yorkshire Cty	-	-	9.6	7.1	12.2
York	-	-	8.7	6.0	11.5

Source: Annual Population Survey (APS)

[Indicator Definitions and Supporting Information](#)

- Each year in Doncaster, 5200 people are admitted to hospital due to smoking and tobacco kills around 675 people within our communities. It is estimated that smoking costs Doncaster £121m each year including the costs of healthcare, social care, lost productivity, and fire costs . Smoking is still the leading cause of preventable ill health and death, and a major driver of differences in health between rich and poor.
- Most smokers start young, they regret ever starting and try to quit multiple times. Two thirds of adult smokers have started smoking before they reach 18 years

old. In Doncaster's 2022 pupil lifestyle survey of year 8 and year 10 pupils, 368 young people described themselves as smokers.

12. In Doncaster's 2022 pupil lifestyle survey, 37% of 2502 primary school age children in years 4 and 6 reported living with someone who smoked, but this is higher (48%) for children who are entitled to free school meals and higher again (53%) for children with Special Educational Needs.

## **EXEMPT REPORT**

13. N/A

## **RECOMMENDATIONS**

14. To delegate to the Acting Director of Public Health and the Chief Finance Officer the acceptance of £499,326.00 per annum <sup>ii</sup> DHSC funding over a five year period commencing 1<sup>st</sup> April 2024, in association with the new national plan; Stopping the Start: our new plan to create a smokefree generation, and to agree to the associated terms and conditions.
15. To delegate to the Director of Public Health in consultation with the Portfolio Holder for Public Health, Communities, Leisure and Culture and Chief Finance Officer the decision as to how to use the DHSC funding within the set terms.
16. To support the proposed investment approach as outlined in section 31 of this report.
17. Note the significant public health impact that the implementation of the new smokefree generation plan will have on long term population health in Doncaster.

## **BACKGROUND**

18. Stopping the Start: A new plan to create a smokefree generation draws on the recommendations laid out in the 2022 independent report by Dr Javed Khan, which found that without action nearly half a million more people will die from smoking by 2030. An outline of the plan can be found below (section 19-21):
19. **Legislate to create a smokefree generation**
  - Increasing the age of sale, so that anyone born on or after 1 January 2009 will never be legally sold tobacco products
20. **Support People to Quit**
  - Increase funding to local authorities to reduce smoking prevalence
  - Increased funding for national campaigns
  - Roll out of the "Swap to Stop" scheme providing adult smokers with free e-cigarettes as part of a comprehensive quit offer
  - Funding of evidence based financial incentives for pregnant smokers to quit

## **Current Smoking Cessation services in Doncaster**

22. Smoking cessation services provide evidence based treatment in line with NICE guidance NG209 combining parallel pharmacotherapy and behavioural support. The Department of Public Health, City of Doncaster Council commission separate community smoking cessation services for children and young people aged 12 and over (Zone 5-19), adults (Yorkshire Smokefree) and smoking in pregnancy (health visiting service).
23. The community cessation services are separate from the local NHS secondary care tobacco treatment programme "QUIT", but the pathways do link and there is cross referral.
24. It is important for public health professionals to recognise the significant issues around the marketing of vapes, particularly towards young people and the production and sales of counterfeit and illicit products. However, vapes can be a very effective tool in supporting smokers to quit and have been successfully implemented into existing smoking cessation services as part of full treatment courses. The adult smoking cessation service in Doncaster has successfully bid for the first "pathfinder wave" of Swap to Stop and will be providing vapes as part of their cessation offer, this will include advice on reducing and stopping the use of e-cigarettes.

## **25. Youth Vaping**

- reducing the appeal and availability of vapes to children, whilst striking a balance with ensuring vapes are available for adults to help them quit smoking. And as-yet, unpublished consultation was carried out at the end of 2023 on the following changes:
  - restricting vape flavours
  - regulating vape packaging and product presentation
  - regulating point of sale displays
  - restricting the sale of disposable vapes
  - introducing an age restriction for non-nicotine vapes
  - exploring further restrictions for other nicotine consumer products such as nicotine pouches
  - preventing industry giving out free samples of vapes to children

## **26. Youth vaping in Doncaster**

Doncaster has an established dedicated youth vaping workstream with partners including enforcement, communities and health. Actions include:-

- Development of a partnership approach to address youth vaping
- Trading Standards have been pivotal in the investigation and enforcement in sales of illicit vapes, participation in days of action and operations, including the use of detection dogs to uncover deliberately hidden and illegal products.
- All secondary schools have been sent resources to support education around vaping

- Research through the Doncaster HDRC is currently underway to explore behaviours and perceptions of young people in Doncaster.

## 27. Enforcement

- Additional funding to support enforcement agencies such as Trading Standards, Border Force and HMRC
- Introduction of new powers for local authorities to issue on the spot fines to enforce age of sale legislation of tobacco products and vapes
- Enhanced online age verification to stop underage sales of tobacco products and vapes

## 28. Enforcement Activities in Doncaster

- The Trading Standards team, City of Doncaster Council will lead on any local enforcement of this legislation, and it is anticipated that additional government funding will be separately allocated to carry out this work. N.B. This is beyond the scope of this report.

29. In order to deliver the plan and support smokers to quit, a five year funding programme will be introduced on April 1<sup>st</sup> 2024. The funding aims to ensure that all local authorities across England are able to deliver a comprehensive offer of support to help smokers to quit through effective interventions. This will be achieved through:

- stimulating more quit attempts by providing more smokers with advice and swift support
- linking smokers to the most effective interventions to quit
- boosting existing behavioural support schemes designed to encourage smokers to quit (for example the 'swap to stop' scheme)
- building capacity in local areas to respond to increased demand
- strengthening partnerships in local healthcare systems

30. The plan outlines a framework for delivering services and support based on the latest public health evidence of what works; focussing on strengthening resources and capacity and enhancing local infrastructures

## Proposed Investment Approach

32. Doncaster's current Tobacco Control Plan is based on the World Health Organisation's Tobacco Control Framework, encompassing measures to prevent smoking and tobacco use, protection from environmental tobacco smoke, enforcement of legislation and specialist cessation treatment for anyone who smokes. Doncaster's tobacco strategy includes a combination of smokefree policies, services, action on illicit tobacco/age of sale, communication campaigns and harm reduction approaches. These interventions impact on a range of environmental, social, economic and behavioural factors that influence smoking behaviours and make it easier for smokers to stop and harder for children to start smoking. A systems wide approach to tackling tobacco is required to meet the

needs of the whole smoking population, not just to those who engage with our stop smoking services.

33. Doncaster Tobacco Alliance (City of Doncaster Council and partners) will lead on the development and strategic oversight of this programme. A workshop is planned for March 2024, which will identify the key areas of focus, objectives and outcomes over the next 5 years.
34. A Smokefree Generations delivery plan will be developed following the workshop, and will remain a live document throughout the 5 years funding period.
35. Success requires a long-term whole system approach, working with partners across Doncaster to identify opportunities to reach and engage with large numbers of smokers. Much of this work will focus on local health inequalities through targeting populations where smoking rates remain the highest.
36. From April 2024, there will be a new Doncaster Adult Community Tobacco Dependency Treatment Service, this provides an opportunity to work in partnership with the provider to build on the enhanced service specification to create greater demand for support and increased capacity to deliver across Doncaster.

### **37. Building capacity for local stop smoking support and services**

- **Leadership, co-ordination and commissioning** through increasing capacity and oversight, coordination and commissioning capacity.
- **Increasing local resources to help people quit** through recruitment of specialist staff, increasing and improving knowledge and skills of non-specialist staff, providing access to support in locations where smokers routinely attend, such as GP surgeries, mental health services and employers. Increasing spend on stop smoking aids as part of a smokers quit attempt. Enhancing current services and infrastructure through increased digital support, locations and targeted outreach in priority populations.

### **38. Building demand for local stop smoking service support and services**

**Increased referral and improved pathways** through investment in the delivery of MECC training and the “very Brief Advice” approach to partners across Doncaster, increasing partnership working with relevant agencies to form part of a local strategy to address associated health inequalities and increase demand for cessation services. Local partners include but not limited to:-

- primary care
- NHS talking therapies for anxiety and depression
- community mental health treatment services for people with severe mental illness
- drug and alcohol treatment services
- large and medium sized employers
- Jobcentre Plus
- charities and community organisations
- other locally identified priority partnerships

39. **Increased promotion of local stop smoking support** through investment in marketing and promotion of local interventions to quit smoking and development of new resources.

- Amplify national campaigns locally through targeted messaging and current services
- Develop Doncaster specific campaigns based on local intelligence and need.
- Continue to support and resource the Smokefree Starts South Yorkshire communications programme

40. **Working together to fund services** through joint funding activity.

- All four South Yorkshire local authorities and the South Yorkshire Integrated Care Board are working collaboratively to develop a South Yorkshire tobacco communications programme “Smokefree Starts”. Additional new funding will enable continued and enhanced support of this programme. The first campaign will launch in April 2024, focussed on smoking and mental health.

41. In addition to the above, additional activities may be carried out where good evidence of effectiveness can be demonstrated. i.e. wider tobacco control policies and efforts to reduce youth vaping, such as local awareness raising campaigns. Allocation of funding towards this area of work will be dependant on the terms and conditions set by the DHSC (to be published).

## **OPTIONS CONSIDERED**

42. Option 1 (recommended): Accept and support the proposed funding of £499,326.00 per annum from the DHSC to enable the continuation and further expansion of a local tobacco strategy in line with the new national plan and related guidance.
43. Option 2: Not agreeing to accept the £499,326.00 per annum funding from the DHSC. Although this option will not prevent residents from accessing the local tobacco dependency treatment services in Doncaster, it will significantly impact the local and national target of reducing smoking prevalence to 5% by 2030.

## **REASONS FOR RECOMMENDED OPTION**

44. This new funding will enable the City of Doncaster Council to strengthen the current systems across Doncaster to develop and provide effective and








accessible resources for our residents to quit smoking and lead healthier longer lives. Additional funding will enable us to scale up our existing community offer to treat more smokers.

45. Stopping young people from ever smoking is probably the most significant public health intervention of this generation. Communicating to young people in a way that they understand and empowering them with the knowledge to make informed decisions that prevents young people from ever smoking whilst recognising that whilst vaping is significantly less harmful than nicotine smoking, it is not risk free. Vaping must not be considered an alternative to smoking for those have never smoked. This message is in tandem with the narrative that despite not being risk free, vapes are a less harmful alternative to cigarettes, and a tool for current adult smokers to quit smoking.


## IMPACT ON THE COUNCIL'S KEY OUTCOMES

46.

Great 8 Priority	Positive Overall	Mix of Positive & Negative	Trade-offs to consider – Negative overall	Neutral or No implications
 <b>Tackling Climate Change</b>	✓			
<p>Comments: A reduction in tobacco smoking will have a significant impact on the environment, reducing air pollution and littering. Cigarettes are the biggest source of microplastic pollution globally. Disposable electronic cigarettes are made from single use plastic, lithium and from production, transportation, use and then disposal, place a significant carbon burden on countries of production and Doncaster.</p>				
 <b>Developing the skills to thrive in life and in work</b>	✓			
<p>Comments: A thriving and sustainable city economy relies upon its residents being healthy and economically active. Smoking is the biggest cause of preventable disease and premature mortality and places a heavy economic burden on the city. By ending tobacco addiction residents will also have more money available to them for other uses.</p>				
 <b>Making Doncaster the best</b>	✓			


<p><b>place to do business and create good jobs</b></p>				
<p>Comments:</p>				
 <p><b>Building opportunities for healthier, happier and longer lives for all</b></p>	<p>✓</p>			
<p>Comments: 58.4% of current smokers want to quit. Stopping smoking will always be beneficial to health. After the age of 35-40 years, for every year of continued smoking, a person loses about 3 months of life expectancy.</p> <p>Studies show that if smokers quit before the age of 30, they can avoid more than 90% of the smoking-attributable risk of lung cancer. Stopping smoking at age 30, 40, 50 or 60 gains, respectively, about 10, 9, 6 or 3 years of life expectancy. A similar study of British women also found that stopping smoking before the age of 40 avoids more than 90% of the increased risk of dying caused by continuing to smoke, while stopping before the age of 30 avoids over 97% of the increased risk.</p> <ul style="list-style-type: none"> <li>• Stopping smoking reduces the risk of 50 different illnesses and conditions</li> <li>• Risk of heart attack will drop by a half one year after quitting</li> <li>• Risk of cancer will fall</li> <li>• Overall fitness and breathing will improve</li> </ul> <p>Smoking and Mental Health</p> <p>It is a common misconception that smoking support mental wellbeing, aiding the smoker to deal with stress and anxiety. When in fact the opposite is true, evidence shows that after the withdrawal stage of quitting people will have reduced anxiety, depression and stress and increased positive mood compared with people who continue to smoke.</p>				
 <p><b>Creating safer, stronger, greener and cleaner communities where everyone belongs</b></p>	<p>✓</p>			
<p>Comments: A 2021 report by DEFRA examining tobacco litter estimated the cost to UK local authorities of around £40 million per year. The Litter strategy for England highlights <u><i>“the most effective way to tackle smoking related litter is by reducing the prevalence of smoking in the first place”</i></u></p>				

[Government explores next steps to clean up tobacco litter in England - GOV.UK](https://www.gov.uk)  
([www.gov.uk](https://www.gov.uk))

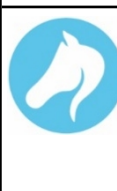
 <b>Nurturing a child and family-friendly borough</b>	✓			
--	---	--	--	--

Comments: The proposed legislative changes will significantly impact this generation, eliminating smoking and reducing health inequalities.

One of the most effective ways to reduce the number of young people smoking is to reduce the number of adults who smoke. We know that children are heavily influenced by adult role models who smoke: Children are 90% more likely to smoke if they live in a household with a smoker. Continuing to encourage adult smokers to quit must therefore remain an important part of reducing prevalence amongst the young and achieving a smokefree generation.

 <b>Building Transport and digital connections fit for the future</b>				✓
--	--	--	--	---

Comments:

 <b>Promoting the borough and its cultural, sporting, and heritage opportunities</b>				✓
---	--	--	--	---

Comments:

<b>Fair &amp; Inclusive</b>	✓			
-----------------------------	---	--	--	--

Comments: Because smoking is so harmful, differences in smoking prevalence across the population translate into major differences in death rates and illness. Smoking is the single largest driver of health inequalities in England and Doncaster. Every resident in Doncaster has the right to good health. Increasing the demand and capacity of smoking cessation services will ensure that all residents are able to get the support they need to quit and stay quit.

### Legal Implications [Officer Initials: NJD Date: 31/1/24]

48. Section 1 of the Localism Act 2011 gives the Council the power to do anything that individuals may generally do.

49. Section 2B of the National Health Service Act 2006 (as amended by Section 12 of the Health and Social Care Act 2012) places a duty on Councils to take appropriate steps to improve the health of the people who live in their area.
50. The Council will received £2,486,000 funding from Department of Health and Social Care, the Council must ensure that the funding is only used for the purpose for which it has been given
51. Legal Services should be consulted at the earliest opportunity to review any terms and conditions of acceptance of the grant funding and ensure that any obligations and in particular, clawback provisions are passed down to third parties
52. Any funding administered by the Council must ensure that it meets any applicable subsidy control requirements. Further legal advice can be provided upon this as the funding is administered.
53. Any goods and services should be procured in accordance with the Council's Contract Procedure Rules and where applicable, the Public Contracts Regulations 2015.

#### **Financial Implications [HR | Date: 25/01/24]**

54. The City of Doncaster Council have received notification from the Department of Health and Social Care that as part of the government plan for a Smokefree Generation, an annual grant has been awarded with year 1 being £499k. Whilst the government has committed £70m per annum for 5 years (2024/25 to 2028/29) exact allocations beyond 2024/25 have yet to be confirmed. The full grant conditions are expected by the end of January 2024, however current information for the funding allocation of circa £499k per annum will be via a Section 31 ring-fenced grant. The Council will be expected to comply with the reporting requirement for expenditure by submitting quarterly reports to NHS England.
55. Further to the above conditions, early correspondence has stipulated that local authorities must maintain their current level of spend on stop smoking services throughout the grant period.
56. The Council's Financial Procedure Rules E9-15 set out the approval required for acceptance of a revenue grant in excess of £250k, in absence of the official terms and conditions of the grant key decision rules apply.

#### **Human Resources Implications [Officer Initials: SB | Date: 30/01/2024]**

57. There are no obvious HR Implications arising from this ODR

## Technology Implications [Officer Initials: PW | Date: 23/01/24]

58. There are no direct technology implications. Any technology requirements (including increased digital support) to support the delivery of the new smokefree generation plan should be discussed with Digital & ICT at the earliest opportunity, with reports for consideration and prioritisation by the Technology Governance Board, where applicable.

## RISKS AND ASSUMPTIONS

59. In order to receive the additional funding, existing investment in smoking cessation must not be reduced over the five year period.

## CONSULTATION

60. N/A

## BACKGROUND PAPERS

61. [Stopping the start: our new plan to create a smokefree generation - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/consultations/stopping-the-start-our-new-plan-to-create-a-smokefree-generation)
62. [Local stop smoking services and support: guidance for local authorities - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/consultations/local-stop-smoking-services-and-support-guidance-for-local-authorities)
63. [Local stop smoking services and support: funding allocations and methodology - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/consultations/local-stop-smoking-services-and-support-funding-allocations-and-methodology)

## GLOSSARY OF ACRONYMS AND ABBREVIATIONS

64. DHSC Department of Health and Social Care

## REPORT AUTHOR & CONTRIBUTORS

**Victoria Shackleton, Public Health Tobacco Control Coordinator**

01302 862146 | [Victoria.shackleton@doncaster.gov.uk](mailto:Victoria.shackleton@doncaster.gov.uk)

**Rachael Leslie, Public Health Tobacco Control Coordinator**

01302 734583 | [Rachael.Leslie@doncaster.gov.uk](mailto:Rachael.Leslie@doncaster.gov.uk)

---

<sup>i</sup> [Stopping the start: our new plan to create a smokefree generation - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/consultations/stopping-the-start-our-new-plan-to-create-a-smokefree-generation)

<sup>ii</sup> [Local stop smoking services and support: funding allocations and methodology - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/consultations/local-stop-smoking-services-and-support-funding-allocations-and-methodology)