

## OFFICER DECISION RECORD 1 FORM

This form should be used to record Officer Decisions in Excess of £100k (but below the key decision threshold), or where required by Financial, Contract or other Procedure Rules or following formal delegation from Cabinet or a Cabinet Member or a Council Committee.

**Decision Reference No: 2024/21/PH/Smokefreegrant**

**BOX 1**

**DIRECTORATE:** Office of the Chief Executive

**DATE:** 17/07/2024

**Contact Name:** Victoria Shackleton

**Tel. No.:** 62146

**Subject Matter:** Smokefree Generations Grant

**BOX 2****DECISION TAKEN**

- 1, To approve the spending plan as detailed in the body of the report.
- 2, To note the terms and conditions of the Funding agreement and any specific items.

**BOX 3****REASON FOR THE DECISION**

Smoking continues to be the single biggest cause of cancer and death in the UK and two in three people who smoke will die from a smoking related illness. This report seeks to maintain efforts to reduce the harm caused by tobacco on the residents of Doncaster, the burden on social care costs and avoidable disability.

Currently In Doncaster, around 30,000 people continue to smoke, leading to immense harm. each year over 4200 people are admitted to hospital and tobacco kills 615 of our residents each year. Long term smokers die on average 10 years earlier, but spend years in poor health living with serious smoking related illnesses.

Doncaster has seen a reduction in the smoking prevalence from 19.6% in 2021 to 12.4% in 2022. Although this reduction is not consistent with recent smoking trends, and we must therefore remain cautious until the next data is released for Doncaster later this year.

The new government funding aims to ensure there is a comprehensive offer to help people to stop smoking across the country, and to increase the number of smokers engaging with effective interventions to quit smoking.

The funding will stimulate additional quit attempts, link smokers to effective interventions, boost community stop smoking service capacity, build professional competence and strengthen partnerships within the local healthcare system.

The new funding, as defined in the grant conditions, will be used to invest in enhancing the commissioned stop smoking service and support, build additional demand and capacity to deliver these services and increase the number of people setting a quit date to achieve the required target to access year on year funding as outlined below.

| National Goal Increase | Smoking Population Proportion | 1 Year figure (Goal*Smoking Proportion) | 5 Year Figure | Y1 (25%) Increase | Y2 (50%) Increase | Y3 (125%) Increase | Y4 (150%) Increase | Y5 (150%) Increase |
|------------------------|-------------------------------|---|---------------|-------------------|-------------------|--------------------|--------------------|--------------------|
| 193,908                | 0.713%                        | 1,383                                   | 6,916         | 346               | 692               | 1,729              | 2,075              | 2,075              |

| Current Rate (as reported in SSS) | Year 1 Total | Year 2 Total | Year 3 Total | Year 4 Total | Year 5 Total |
|-----------------------------------|--------------|--------------|--------------|--------------|--------------|
| 1,865                             | 2,211        | 2,557        | 3,594        | 3,940        | 3,940        |

### **Proposed Investment Approach**

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.

Doncaster Tobacco Alliance (City of Doncaster Council and partners) will lead on the development and strategic oversight of this programme.

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.

In April 2024, a newly commissioned Doncaster Adult Community Tobacco Dependency Treatment Service became operational, 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.

### **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.

### **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

**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

**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 launched in May 2024, focussed on smoking and mental health.

For year 1 the spending projection is as follows

| <b>Projected spend</b>                          | <b>Year 1</b> |
|---|---------------|
| Regional Tobacco Alliance (10%)                 | £49,932       |
| Grade 8 Post (50k per annum) fixed term 5 years | £50,000       |

|   |                 |
|---|-----------------|
| Grade 8 Post (50k per annum) fixed term 18 months | £50,000         |
| Leadership, coordination, and commissioning       | £255,000        |
| Community Engagement                              | £52,000         |
| Smokefree Environment                             | £10,000         |
| Discretionary budget                              | £10,000         |
| Comms and Marketing                               | £20,000         |
| Overheads   | £2,394          |
| <b>Spend</b>                                      | <b>£499,326</b> |
| <b>Year 1 budget</b>                              | <b>£499,326</b> |

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#### **BOX 4**

##### **ALTERNATIVE OPTIONS CONSIDERED AND REJECTED**

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.

#### **BOX 5**

##### **LEGAL IMPLICATIONS**

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

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 improve public health, and specifically at 12(1) a local authority must take steps as it considers appropriate to improve the health of the people who live in their area.

The Council must ensure that any funding is used in accordance with any grant agreement and any goods and services should be procured in accordance with the Council's Contract Procedure Rules and where applicable, the Public Contracts Regulations 2023.

Name:  S. R. Fawcus  Date:  05.06.24

Name of Assistant Director of Legal and Democratic Services (or representative)

## **BOX 6**

### **FINANCIAL IMPLICATIONS:**

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(2024/25) 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.

Corporate report 'Stopping the Start: Smokefree Generation plan and funding' was signed in January 2024 as a key decision so should be read in addition to this ODR. This Corporate report provided an overview of the recently published policy paper "Stopping the Start. Additionally the report sought approval to accept funding from the Department of Health and Social and deliver a programme of activities to reduce tobacco use and associated harms and prevent uptake of smoking over the five year funding period.

The 2024/25 annual grant £499k has been confirmed as a ringfenced Section 31 local authority grant for local stop smoking services and support - GRANT DETERMINATION 2024-2025: No 31/7043.

The grant must only be used to provide local stop smoking services and support. The terms of the grant make it clear that the Council must maintain existing spend on these services and support from the public health grant.

The grant of £499k is expected to be spent in the financial year of award and advanced notification expected of any forecast underspend. The initial grant notification does not specify what will happen with any in year underspends, for the time being it is assumed any underspend would need to be repaid.

The forecast of how the £499k is to be spent is detailed in the body of the report. All spend is against revenue expenditure, there are no plans to spend against any capital programmes.

At the end of the financial year 2024/25 a Statement of Grant Usage (SOGU) Assurance

Template will be required to be signed by the authority's Finance Director or equivalent. The exact date for the return of the SOGU is currently unknown.

The Council will be expected to comply with the reporting requirement for expenditure by submitting quarterly reports to NHS England.

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.

The Council's Financial Procedure Rules E9-15 set out the approval required for acceptance of a revenue grant in excess of £250k.

**Name: Nick Cameron**

**Date: 17<sup>th</sup> July 2024**

Name of Chief Financial Officer and Assistant Director of Finance (or representative)

## **BOX 7**

### **OTHER RELEVANT IMPLICATIONS**

None identified.

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Name of Assistant Director (or representative)

**ANY IMPLICATIONS SENT TO DEPARTMENTS SHOULD GENERALLY BE SUBMITTED AT LEAST 5 WORKING DAYS IN ADVANCE TO ENSURE THESE CAN BE GIVEN THE RELEVANT CONSIDERATION.**

## **BOX 8**

**EQUALITY IMPLICATIONS:** (To be completed by the author).

Some demographic groups are known to have higher rates of smoking and, therefore, be at greater risk of tobacco-related ill health, including people from lower socioeconomic groups. Interventions to reduce smoking in our communities will help to reduce these health inequalities, through investing more heavily in those high prevalence groups who are most addicted, those with the most complex needs and those least able to afford to quit without significant investment and intensive support.

Overall proposed approach is significantly positive for those in high prevalence smoking groups who will be most impacted by the changes. This includes:

- Men in high prevalence groups (e.g. routine and manual workers, men who have sex with men)
- Black and ethnic minority groups
- Children and young people
- Households of pregnant women
- Those with severe and enduring mental illness
- Those in areas of high deprivation with high smoking prevalence

The increased investment in Stop Smoking Service provision and communication campaigns will positively impact on the uptake of young people smoking, as changes in social norms occur and adult smoking rates continue to decline smoking will become less desirable and the intergeneration cycle of smoking will be broken.

### **BOX 9**

#### **RISK IMPLICATIONS:** (To be completed by the author)

Some of the smoking population might be described as more clinically complex (for example, they may have higher levels of tobacco dependency, live more complex lives or have a range of additional clinical needs or long term conditions). Over time, there will be a greater proportion of the smoking population remaining in this group. This can make the task of the services more difficult over time whilst potentially increasing the cost of these.

interventions. To mitigate this challenge, it is important that services are resourced and that the most recent evidence-based practice is used with this group.

Failure to meet the grant conditions of maintaining the current spending on stop-smoking services and not delivering services as set out in the grant reporting conditions could lead to DHSC withholding up to 30% of the allocated financial year's funding. The Public Health team will manage compliance with the grant conditions via quarterly contract management meetings, which will monitor and manage grant spending, ensuring that services are delivered as outlined in the grant conditions, and the Tobacco Control board will have oversight of the grant spending.

### **BOX 10**

#### **CONSULTATION**

The Tobacco workplan and strategy was developed in partnership with the Doncaster Tobacco Alliance, discussion and consultation have taken place with a range of stakeholders to inform the development of services/interventions and evaluations.

### **BOX 11**

#### **INFORMATION NOT FOR PUBLICATION**

In accordance with the Freedom of Information Act 2000, it is in the public interest for this decision to be published in full, redacting only the signatures.

Name: Claire Hewitt

Date: 06.06.2024

Name of FOI Lead Officer for service area where ODR originates

### **BOX 12**

#### **BACKGROUND PAPERS**

Please confirm if any Background Papers are included with this ODR YES

(If YES please list and submit these with this form)

Cabinet Report

**BOX 13**

**AUTHORISATION**

**Name:** Rachael Leslie    **Signature:**    **Date:** 12<sup>th</sup> June 2024

Director of Public Health

**Does this decision require authorisation by the Chief Financial Officer or other Officer**

**YES**

**If yes please authorise below:**

**Name:** Faye Tyas    **Signature:**    **Date:** 24.07.24

Service Director of Finance & Technology & Chief Financial Officer

**Consultation with Relevant Member(s)**

**Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Designation** \_\_\_\_\_

**(e.g. Mayor, Cabinet Member or Committee Chair/Vice-Chair)**

**Declaration of Interest YES/NO**

**If YES please give details below:**

**PLEASE NOTE THIS FORM WILL BE PUBLISHED ON THE COUNCIL'S WEBSITE IN FULL UNLESS IT CONTAINS EXEMPT OR CONFIDENTIAL INFORMATION.**

Once completed a PDF copy of this form and any relevant background papers should be forwarded to Governance Services at [Ladem@doncaster.gov.uk](mailto:Ladem@doncaster.gov.uk) who will arrange publication.

It is the responsibility of the decision taker to clearly identify any information that is confidential or exempt and should be redacted before publication.