

**WIRRAL COUNCIL
EXECUTIVE MEMBER DECISION
9TH JULY 2015**

SUBJECT:	Proposal to re-commission Stop Smoking Treatment Services
WARD/S AFFECTED:	All Wards
REPORT OF:	Fiona Johnstone Director of Public Health
RESPONSIBLE PORTFOLIO HOLDER:	Councillor Christine Jones Portfolio holder for Adult Social Care and Public Health
KEY DECISION?	Yes

1.0 EXECUTIVE SUMMARY

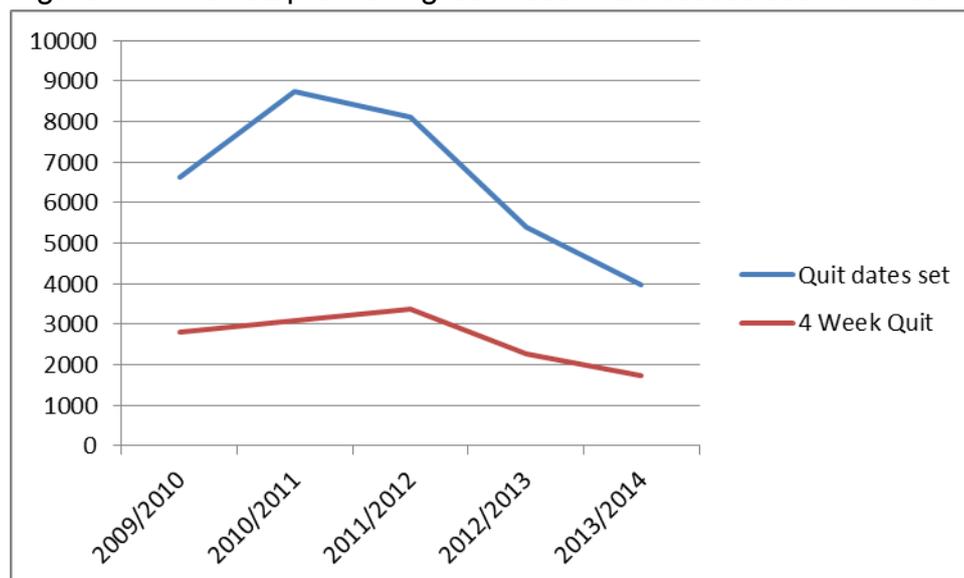
- 1.1 Tobacco smoking is the single largest preventable cause of ill health and premature death killing over 79,000 people each year in England and 680 adults aged 35 years and over in Wirral alone.
- 1.2 Stop Smoking Services should not be regarded as the main driver for reducing smoking prevalence, which is affected to a much greater degree by national policy and broader local tobacco control strategies. However stop smoking services are an important element within an overall tobacco control programme and form part of wider action to reduce local smoking prevalence.
- 1.3 Stop Smoking Services are highly clinically and cost effective, with smokers four times more likely to quit using these services than going it alone. However, local services have experienced significant drops in attendance as more people are opting to stop smoking without support and an increasing number of people use e-cigarettes to help them quit –this trend has been seen across the country.
- 1.4 The purpose of this report is to request that Cabinet agrees a budget of £4M for an initial 3 year contract (2016-2019) with an option of two one-year extensions for a Nicotine and Smoking Cessation Treatment Service as a key part of our local tobacco control work.

2.0 BACKGROUND AND KEY ISSUES

- 2.1 Tobacco smoking kills more people than deaths from alcohol misuse, obesity use of illegal drugs, murder, suicide, road traffic accidents and HIV infection combined.

- 2.3 The smoking rate for the borough in adults is 18.4% (this is the same as the England rate). However these figures mask significantly higher levels of smoking in our more deprived areas. In 2012, a local prevalence study reported that 31% of local people smoke in these areas.
- 2.4 Smoking disproportionately affects those disadvantaged by poverty and is a major contributor to health inequalities, accounting for half of the difference in life expectancy between our most deprived and most affluent residents. Nationally, adults in routine and manual occupations are twice as likely to smoke as those in managerial and professional occupations. Locally, a third of routine and manual workers smoke (33%). People on low incomes start smoking at a younger age and are more heavily addicted, spending up to 15% of their total weekly income on tobacco^{1,2,3}.
- 2.5 The total cost to the Wirral economy of smoking is estimated as £77.6m. The biggest costs are through lost productivity, NHS costs, passive smoking and smoking related fires. Locally nearly 60% of fatalities in residential fires involved smoking materials⁴.
- 2.6 **Current commissioned services**
Wirral currently has a range of providers commissioned to provide stop smoking services as detailed below:
- The specialist provider for stop smoking services is Wirral Community NHS Trust (CT) who is also responsible for providing a training programme to quality assure other providers who provide cessation services e.g. Wirral Pharmacies; Practice Nurses; Wirral Change and Tomorrow's Women Wirral.
 - Community Action Wirral (CAW) supports 3rd sector organisations to provide stop smoking services to population groups who do not present to mainstream services e.g. Black and Minority Ethnic groups; those not in employment and people residing in areas of high deprivation. The third sector providers are paid on a payment by results basis for achieving four week quits as well as 12 week quits.
 - Solutions for Health provide a 12 week community based service for pregnant smokers and is also paid on a payment by results basis.
- 2.7 The increasing use of e-cigarettes by smokers as an aid to quit smoking has seen an attendance at services fall – this is a trend that has been experienced across the country. The following graph (Figure 1) illustrates the challenges that local services have experienced over the last five years as the number of people using the service, reported as quit dates set has fallen. Given the challenges that remain (as outlined above) it is timely to look at a revised model for stop smoking services to provide a more cohesive offer for local people, remove duplication and address the use of e-cigarettes and other nicotine delivery devices.

Figure 1: Wirral Stop Smoking Services - Quit dates set vs 4 week quits



2.8 The number of people who are still not smoking after four weeks is the national outcome measure for stop smoking services. Locally, this target is a performance indicator within the Corporate Plan for the Families and Wellbeing Directorate. The Families and Wellbeing Policy and Performance Committee have been kept informed of the challenges facing the programme and the proposed actions to increase 4 week quit rates including the re-commissioning of the programme.

2.9 The existing budget by Wirral Council for the provision of stop smoking cessation services is currently £1,162,818 per annum. It is proposed to commission a nicotine and smoking cessation treatment service for an initial term of three years (1st April 2016 to 31st March 2019) at a maximum value of £4M (£800,000 per annum), with the option for two further one year extensions.

2.10 The contract will be offered as a block contract with a payment by results element to incentivise performance and will be rebased on an annual basis. It is proposed to commission a new specialist service that will be operationally live from the 1st of April 2016

2.11 Rationale for re-commissioning exercise

Smoking is the main risk factor for a large number of diseases and the main cause of health inequalities. Wirral needs an efficient and effective stop smoking programme that provides support for people who want to quit and ongoing support and relapse prevention.

2.12 The budget for the new service has been set at £800,000 per annum following a benchmarking exercise with our statistical neighbours. In addition we have reviewed the Public Health England Spend and Outcomes Tool (SPOT) which compares spend on categories against outcomes. The SPOT tool reports that we have good outcomes but high costs for our current programme. On this

basis we believe we need to achieve better value for money from our programme.

- 2.13 The proposed re-commissioning of services will provide an opportunity for commissioners to have a refreshed and clearer view of the funding model, and to discuss delivery of some elements of service on the basis of tariff or payment by results.

3.0 RELEVANT RISKS

- 3.1 There are high levels of smoking in the borough, Wirral needs to ensure that there is a cost effective service reaching the most challenged communities supporting the maximum number of smokers to quit. this is currently not being achieved.

4.0 OTHER OPTIONS CONSIDERED

- 4.1 The option to continue with the current provision was considered, however, this would not support innovation and the potential to deliver a more cost effective service. This service has never been subjected to market testing, the Council is required to maximise the value for money it achieves for all services - the current service model is not providing value for money.

5.0 CONSULTATION

- 5.1 The Public Health team carried out a 12 week consultation from January to March 2015 to gather ideas and opinions to shape Wirral's Specialist Stop Smoking programme to ensure it reaches the maximum number of smokers who want to stop smoking.
- 5.2 Methods of consultation included an online questionnaire advertised and made accessible to the public, paper versions of the online questionnaire completed by clients during their session with existing services, an engagement event for professionals who have an involvement/interest in either smoking cessation, prevention and/or other aspects of tobacco control.
- 5.3 The public consultation yielded 158 responses of which there was a fairly equal split of gender. Representation across ethnic origins was unevenly weighted towards ethnic minority groups; 40% were White British and 44% were from ethnic minority groups. Therefore this consultation is not a reflective view of the wider demographics of Wirral.
- 5.4 The engagement event was attended by 25 professionals including practice nurses, clinical nurse specialists, pharmacists, stop smoking advisers, housing providers, health visitors and professionals from Public and Private Services. There was also representation from Wirral Clinical Commissioning Group.
- 5.5 The following summarises the key points drawn from the engagement event and questionnaire analysis:

- A collaborative and systemic approach to tobacco control and smoking cessation is needed
- The prevention agenda needs to increase e.g. promote smokefree parks; smokefree school gates
- Workplace and venue smokefree policies can support the shift in behaviour needed to de-normalise smoking
- Treatment services (both core and outreach) with adviser contact are still very much part of quitting
- Treatment service must present new and innovative ways of engaging with the client and/or repeat successful engagement methods used before
- A virtual programme of support should be developed to support people who want to quit on their own
- A buddy/peer mentor system should be developed around nicotine addiction (similar to those schemes available for drug and alcohol addiction)
- A harm reduction approach needs to be considered with a small group as a pilot, in the first instance, to investigate the benefits

This information will be used to develop the revised service model. The consultation report is available on request.

6.0 OUTSTANDING PREVIOUSLY APPROVED ACTIONS

6.1 There are no outstanding actions

7.0 IMPLICATIONS FOR VOLUNTARY, COMMUNITY AND FAITH GROUPS

7.1 Organisations from the Voluntary, Community and Faith are currently involved with the delivery of elements of provision. The re-tender will present the opportunity for greater involvement.

8.0 RESOURCE IMPLICATIONS: FINANCIAL; IT; STAFFING; AND ASSETS

8.1 There is currently allocated funding for the services highlighted. The tender exercise would enable a more integrated and cost effective model to be developed. T.U.P.E. may be an issue that will need to be addressed.

9.0 LEGAL IMPLICATIONS

9.1 Required Standing Financial Instructions will be followed. T.U.P.E. may be an issue that will need to be addressed.

10.0 EQUALITIES IMPLICATIONS

10.1 Has the potential impact of your proposal(s) been reviewed with regard to equality?

(a) Yes and impact review is available

<https://www.wirral.gov.uk/my-services/community-and-living/equality-diversity-cohesion/equality-impact-assessments/eias-april-2014/eias-families-wellbeing>

11.0 CARBON REDUCTION AND ENVIRONMENTAL IMPLICATIONS

11.1 There are no carbon reduction implications based on the content of this report.

12.0 PLANNING AND COMMUNITY SAFETY IMPLICATIONS

12.1 There are no planning and community implications based on the content of this report.

13.0 RECOMMENDATION/S

13.1 It is recommended that Cabinet agree a maximum budget of £4,000,000 for a three year contract (2016-2019), with an option for two further one year extensions for a Nicotine and Smoking Cessation Treatment Service.

13.2 It is recommended that the Director of Public Health be authorised to secure these services within the Council's Contract Procedure Rules, and to take appropriate action in respect of ensuring effective implementation of the service.

14.0 REASON/S FOR RECOMMENDATION/S

14.1 The main reason for the recommendation is to enable the commissioning of a cost effective cohesive system to help people stop smoking and address nicotine addiction.

Fiona Johnstone
Director of Public Health
0151 666 8210
fionajohnstone@wirral.gov.uk

APPENDICES

1. Consultation questionnaire

BACKGROUND PAPERS/REFERENCE MATERIAL

¹Wanless D (2004) *Securing good health for the whole population*. London: TSO

²Marmot et al (2010) *Fair Society, Healthy Lives: strategic review of health inequalities in England post 2010*. Marmot Review Secretariat London

³Praxis (2012) *Wirral Smoking Prevalence Report*

3 Collins B (2015) *Cost Effectiveness of Stop Smoking Services in Wirral*

BRIEFING NOTES HISTORY

Briefing Note	Date

SUBJECT HISTORY (last 3 years)

Council Meeting	Date

CONFIDENTIAL & ANONYMOUS

Stop Smoking Survey

What is the purpose of the survey?

This survey is about smoking and quitting experience/s. We would like to find out the help people want to stop smoking or to stay smokefree. We also want to hear about any previous attempts you have made to quit smoking. **If you are a smoker or have been a smoker we want to hear from you.**

Will my taking part in the study be kept confidential?

Yes. We take confidentiality very seriously. The survey does not ask for your name so no-one will know you have taken part and your answers cannot be traced back to you. All surveys will be kept on a secure, password protected computer. Please be aware that, because we do not take names, it is unlikely you would be able to withdraw your answers from the study after you have returned the survey.

Do I have to take part?

No. It is up to you to decide whether or not to take part. Please read this information and take your time to decide. **However, please only complete this survey if you live, work, socialise or access Wirral services.**

What's involved?

The survey asks for brief information about you, your smoking habits and experiences, past and present.

Are there any risks/benefits to being involved?

There are no direct risks or benefits to you from being involved in the study, but the information you provide will be used to help develop and improve future services for you and others.

If you are filling in a paper copy of this survey where did you get it from?.....

If you would like to access the survey online please use the following link

<https://www.surveymonkey.com/r/GDKF97Z>

Contact details

If you have any questions or would like to discuss the study, please contact:

Tricia Cavanagh, triciacavanagh@wirral.gov.uk

1. How old are you?

- Under 16 16-19 20-24
 25-29 30-34 35-39
 40-44 45-49 50-54
 55-59 60+

2. What is your postcode? (We will not use this information to identify or contact you, we just need to find out which areas people live in)

_____ e.g. CH41 5AL

3. How would you describe your ethnic origin? (Please tick only one)

- White British Asian/Asian British
 White Irish Asian/Asian British: Indian
 Black/black British Asian/Asian British: Other Indian

 White European Asian/Asian British: Chinese
 Gypsy/Traveller Mixed white and Asian
 Mixed white and black
 Other (please specify) _____

4. Are you?

- Male Female Other (Please tell us _____)

5. Which best describes you? (Please tick only one)

- Smoker (tobacco user) Ex-Smoker
 Vaper (use E.Cigs only) Use both e-cigs and tobacco

6. If you are a smoker, have you tried to quit before?

- Yes No

If No, why not?

.....

7. If you have tried to quit before, why did you decide to quit at that time?

8. Do you see yourself smoking for the rest of your life?

- Yes No Don't know Not applicable

9. If you decided to quit what would be your reasons for wanting to do this?

10. Where would you go, or what action would you take, if you or someone you knew needed advice or support on stopping smoking? (Please tick all that apply)

- Friends
- Partner
- Pharmacist/chemist
- Magazines
- Local Paper
- Television
- Family
- Family doctor/GP/Practice nurse
- Telephone helpline
- Internet – other websites
- Internet – NHS websites
- Social Media (e.g. Facebook; U-Tube)
- College/school/university
- NHS Stop Smoking Service
- Other (please specify) _____

- 11. Which one of these (in Question 10) would you go to FIRST?**
- 12. Please tell us what, if any, barriers you think there are to accessing stop smoking support from those options you have selected in Question 11 ?**
- 13. If you are a smoker, what would help you to quit? Please provide a list in the box below**
- 14. If you no longer smoke, how did you go about stopping and what did you use to help you quit? Please list in the box below**
- 15. If you have stopped smoking before but then started again, what would have helped you stay quit?**
- 16. Do you find national No Smoking campaigns such as Stoptober, New Year Quit, Smokefree Cars campaigns useful for helping you to quit/think about quitting?**
 Yes No Don't know
- 17. If you did find the campaigns useful for helping you to quit/think about quitting are you able to say why?**
- 18. If you did not find the campaigns useful for helping you to quit/think about quitting, are you able to say why?**
- 19. Would you like to see more campaigns in your area?**

Yes

No

Don't know

20. If Yes, what sort of content should the campaigns have? What should the campaigns look like?

21. Do you have any other comments?

**THANK YOU FOR TAKING THE TIME TO FILL OUT THIS
QUESTIONNAIRE**

If you have any questions or comments about the questionnaire, please leave them here or contact, Tricia Cavanagh: triciacavanagh@wirral.gov.uk