

TITLE OF REPORT: Work to address the harms caused by tobacco

REPORT OF: Director of Public Health

SUMMARY

Care, Health & Wellbeing Overview and Scrutiny Committee have agreed that the focus of its review in 2017-18 will be work to address the harms caused by tobacco.

During the course of the review it is proposed that the Committee will consider how tobacco use in Gateshead impacts negatively upon physical and mental wellbeing, its impact upon the local health and social care economy, and its role in perpetuating poverty and inequalities within and between generations. The Committee will also consider the range and extent of current activity to address those harms, with a view to agreeing a set of recommendations.

This report sets out the proposed scope of the review and the process for taking it forward.

Background

Vision 2030 sets out the 6 Big Ideas for Gateshead. Of these, "Active and Healthy Gateshead" resolves to provide support to encourage people to improve their health and lifestyle. The five year Council Plan sets out how Gateshead will be a healthy, inclusive and nurturing place for all.

The Gateshead Health and Wellbeing Board have undertaken to reduce smoking prevalence in Gateshead to 5% or less by 2025.

Scope of the Review

The review will provide an overview of current activity to reduce harms caused by tobacco in Gateshead compared to best national and/or international practice, where such practice exists.

Currently, about 18.3% of adults in Gateshead smoke, compared to an English average of 16.9%. This is around 29 485 people. Around 12.4% of 15 year olds in Gateshead smoke, around 280 young people. Nearly 500 Gateshead residents every year will die from smoking related diseases.

Activity that reduces harm caused by tobacco can be thought of in terms of four main sets of activities:

- Stopping people starting smoking
- Helping people stopping smoking
- Reducing exposure to second hand smoke
- Tobacco control (i.e. Enforcement of legislation round the sale of tobacco)

At a population level, making tobacco use the exception rather than the norm (the “denormalisation” of tobacco use) can be seen as central to all of the above.

It is proposed that the above is considered in the context of:

- Higher than average levels of smoking in Gateshead
- The fact that smoking remain the single cause of most preventable illness and death in Gateshead
- Significant inequalities in the prevalence of smoking between different groups and areas
- Reducing demand for stop smoking services
- Particularly low levels of take up of stop smoking services amongst some groups i.e. People from black, Asian and minority ethnic groups
- Pressure on Public Health budgets now and in the future and opportunities for future savings to primary and secondary care costs from prevention activity.

The Process

The process and timescale for the review in this paragraph is set out in Appendix 1. It is proposed that the review will take place over an eleven month period from 20 June 2017 to 17 April 2018. It will involve the presentation of expert evidence, research and site visits.

Who will be involved?

It is proposed that the first evidence gathering session will provide a detailed overview of those harms arising in Gateshead due to tobacco use, as outlined above. Information will be presented at the most local levels possible to provide members with insight into inequalities arising from tobacco use across Gateshead, and how tobacco harms impact upon individual wards. Subsequent evidence gathering sessions will include presentations from internal services, external organisations and experts in their respective disciplines.

Evidence will be sought from Gateshead Public Health Team, Development and Public Protection, the Newcastle and Gateshead Clinical Commissioning Group, Gateshead Hospitals NHS Foundation Trust, Northumbria Tyne and Wear NHS Foundation Trust, Gateshead Advice Centre, Public Health England, Fresh North East, Action on Smoking and Health (ASH) and leading academics and clinicians.

Recommendation

Overview and Scrutiny Committee is recommended to agree:

- The scope, process and timescale as set out in this report

Progress of the Review

This appendix sets out the standard framework for Overview and Scrutiny Committees to agree and conduct policy reviews and includes proposals specific for this review.

Stage 1

The scope, purpose and intended outputs of the Review should firstly be agreed by the Cabinet and the relevant Overview and Scrutiny Committee. The recommendations of Advisory Groups may also be considered if appropriate.

Proposal

- 20th June: Scoping report to Scrutiny Committee

Stage 2

Evidence may be gathered by the Overview and Scrutiny Committee making visits as necessary or inviting persons and organisations to give evidence before it. Relevant Group or Strategic Directors and the Chief Executive will assist the Overview and Scrutiny Committee as necessary. The evidence gathered by the Overview and Scrutiny Committee will be written up by officers.

Proposal

- 12 September, 31st October, 5 December 2016 And 23 January 2018- To have evidence-gathering events that will involve research, presentations by relevant officers, outside organisations and site visits if appropriate (details to be confirmed).

Stage 3

The Overview and Scrutiny Committee will then meet (as many times as is necessary) to analyse the information gathered and prepare its conclusions.

Proposal

- 6 March 2018 - Committees to consider an interim report, prepared by the Lead Officers, and to analyse the evidence presented.

Stage 4

Officers will then prepare a report on the issue based on the views of the Overview and Scrutiny Committee. Officers will submit this report to the next practicable meeting of the Overview and Scrutiny Committee to secure agreement that the report is a fair, accurate and complete reflection of the Overview and Scrutiny Committee's conclusions.

Proposal

- 17 April 2018- Draft final report to be considered by the Committee.

Stage 5

The Chair of the Overview and Scrutiny Committee will then present this report to the Cabinet. The Cabinet may take note of the report, approve all or some of the report's recommendations or refer the report to full Council or to an Advisory Group for further consultation.