

CABINET MEMBER FOR PUBLIC HEALTH & THE VOLUNTARY SECTOR – 25 JUNE 2014

PROVISION OF SMOKING CESSATION SERVICES

Report by the Director of Public Health

Introduction

1. Tobacco use is the most significant risk factor for the development of cardiovascular disease, chronic obstructive pulmonary disease and a number of cancers, including carcinoma of the lung, oesophagus and bladder.
2. Reducing the number of people in the population who smoke is, therefore, an effective public health measure to reduce the burden of these conditions on local health and social care services. It is also the most effective method of reducing rates of premature mortality and morbidity.
3. In Oxfordshire:
 - 17.5% of adults (over the age of 18) in Oxfordshire are smokers (2011/12 data).
 - The proportion of adults who are smokers remains higher in routine and manual workers (31%), the long term unemployed and in more deprived communities.
 - Between 2009-2011 there were 2292 deaths attributable to smoking
 - In 2010/11 there were 1280 smoking attributable hospital admissions
 - In 2011/12, approximately 180 children were admitted to hospital for asthma (Crude rate of 120 per 100,000) a proportion of which will be directly related to passive smoking
 - In 2012/13, 6279 people set a quit date and 3703 successfully quit with the help of stop smoking services
4. Reducing the number of people that smoke is an important priority for all of us because of the well-known benefits to the health of both individual smokers and those around them.
5. The Oxfordshire County Council contract for current provision of smoking cessation services in Oxfordshire will cease on March 31 2015. Oxfordshire County Council currently has no in-house provision of smoking cessation services. In order to guarantee continuation of smoking cessation services in Oxfordshire, Oxfordshire County Council will need to put in place a contract to commence 1 April 2015.

General Content

6. Despite the obvious risks to their health, nearly 15% of adults in Oxfordshire are still smoking and two thirds of them would have become addicted before they were 18. Although the prevalence of smoking is falling in the county and it is lower than national and regional rates, the benefits of stopping, or not starting in the first place, are still not being realised universally across the population.
7. Smoking harms both individuals and the local community. The annual costs of smoking in Oxfordshire are estimated to be £149.6 million.

Exempt Information

8. Annex 1 provides additional information on the proposed service model if a commissioning decision is made. This is commercial and sensitive as it contains information that would give potential providers advance knowledge of decisions which should only be released through the formal procurement route.

Corporate Policies

9. Reducing the prevalence of adult smokers helps to deliver the Councils Corporate Plan to support healthy and thriving communities. Increasing the number of smoking quitters, particularly from target groups, is a high priority for the Health and Wellbeing Board and Public Health England.

Financial and Staff Implications

10. Public Health has a ring fenced budget which is approximately £25 million per year.
11. Money is already committed to paying for smoking cessation services within the Public Health budget so this does not represent a new spend. This information is already reported to the Cabinet.
12. Contract arrangements need to be in place for 1 April 2015. Potential providers need to be aware of the award in December. This will ensure that there is sufficient time to implement arrangements.

Equalities Implications

13. The poorest in our county are twice as likely to smoke as the richest, with 30% of routine and manual works smoking compared to 14% of managerial and professional workers.
14. As well as targeting hard to reach groups in areas of deprivation, the success of smoking cessation programmes is intrinsically dependent on working with other areas of health and wellbeing. For example:

- People with mental illnesses are 70% more likely to smoke than people without mental health problems.
- Helping pregnant women to give up smoking leads to health benefits for themselves and their unborn children

RECOMMENDATION

15. The Cabinet Member for Public Health & the Voluntary Sector is RECOMMENDED to approve the incurring of expenditure for the commissioning of the Smoking Cessation Programme and to delegate to the Director of Public Health, following consultation with the Cabinet Member for Public Health and the Voluntary Sector, the authority to determine tenders and contracts in order to secure the provision of services’.

Dr Jonathan McWilliam
Director of Public Health

Background Papers: Nil

Contact Officer: Dr Rebecca Cooper, Public Health Consultant; Tel: (01865) 328553

June 2014