Agenda Item No. 6 – Health Scrutiny Tobacco Control Review 2013/14: Delivery Against Recommendations

Recommendation	Action	Lead/liaison with	Timescale	Progress/report Feb 2015
1.0 Stop Smoking S				
1.1	Engage with key community groups to establish what will best help them to quit; best way to communicate dangers of smoking and benefits of quitting. Also engage with community and primary care to identify training needs to accelerate quit rates amongst key groups. Institute community Champions network from engagement with key groups to ensure the effective development of SSS services.	Public Health (PH) Dudley Stop Smoking Service (SSS) in collaboration with Dudley Clinical Commissioning Group (CCG) and DGHFT Community Services.	Sept 2015	PH SSS staff member has carried out semi structure interviews with male routine and manual workers (in workplace setting) as part of Masters research. Initial key findings suggest peer and family members smoking behaviour influences smoking initiation. Workplace policy is key to influencing and changing smoking behaviour. Final recommendation will be taken forward in the Tobacco Action plan for 2015-16 PH SSS have commissioned Dudley Healthwatch to engage with CCG, DGHFT and targeted communities. Work programme to commence Feb 2015
1.2, 1.3	Dudley SSS target provision for: MH groups; Routine/manual workers; key BME groups; and most disadvantaged communities evidenced through existing data monitoring	PH SSS working with DWMHPT, Key Voluntary Community Sector agencies, and Environmental Health - DUE.	March - Sept 2015	Dudley SSS have undertaken a scoping exercise with Mental Health service providers and patients to improve communication on promoting stop smoking services. Resources in development in conjunction with DWMHFT leads. Have seen an increase in uptake of workplace stop smoking services which targets routine and manual workplaces. Dudley SSS Health Equity Audit (HEA) for 2012-13 has shown the number of clients accessing the service is five times higher in the most deprived quintile compared to the least deprived quintile and Access from clients in routine and manual social economic classification is significantly higher than from other occupations 2 key localities identified from HEA that have high smoking prevalence and low stop smoking service access (Coseley East, Coseley West

				<ul> <li>and Pedmore &amp; Stourbridge East.).Additional service provision has been set up in these areas from Nov 2014. Data on outcome/impact available May 2015.</li> <li>Plans to further target service provision in the 2015-16 Tobacco Action Plan in conjunction with CCG commissioners</li> </ul>
1.4	Family Nursing Partnership (FNP) commissioned to recommended capacity with the particular aim of accelerating reduction of tobacco use across new families	CCG/NHS England-FNP commissioner (Public Health will be the commissioner of FNP from 2016)	Jan 2015	<ul> <li>FNP have recruited 2 new Nurses who are due to commence in post the end of this month.</li> <li>That will take them to full capacity of 8 nurses/ 1 supervisor.</li> <li>They promote stopping smoking as key part of their role. The National FNP Unit are updating the programme to bring into line with UK policy . Tobacco update not completed yet but in process which hopefully will strengthen the current programme.</li> </ul>
2.0 Young People-		<b>DU 000</b>	00044	
2.1	Deliver a multifaceted local programme that supports smokefree communities, social norms , targets younger children and family/parents. Extend Kick-Ash creative advocacy approach across early years provision. Consult young people representative groups on development of programme including Youth Parliament.	PH SSS commission programme in conjunction with Children Services Education leads and Children Centres.	Sep 2014	PH SSS commissioned insight with health professional working with 0-5 years on the update of the Smokefree Children Programme (SFC). Engagement carried out Sep-Dec2014. Key actions and resource needs identified and are in progress. Workshops were developed using the straight talking DVD to discuss with primary school children where they encounter people smoking around them and what they think could be done about this. 19 school received creative workshop in Jun 2014 and a further 20 in Oct 2014 (total of 3,100 pupils) Follow up of the programme in Jan 2015 with a sample (100) of participants has shown 37 children have directly influenced someone to

				stop smoking around them or stop completely
				Kick Ash members held a 'red carpet' celebration event in Oct 2014 to showcase work to Youth Parliament, family & friends. 152 people attended and an advert produce by young people in Dudley was premiered this can viewed at <u>www.dudleykickash</u>
2.2	Implementation of a voluntary smokefree code/policy specifically for outdoor play areas	Law and Governance - Corporate Resources	Sept 2014	96% of the primary school children that were followed up after the smokefree children workshops said they wanted action taken (by the Local Authority or Government) to protect them from second hand smoke. Plan for 2015-16 SFC programme to include developing smokefree school grounds (including school gates) and parks
	tnership and Communication		Max 0045	
3.1, 3.2, 3.4, 3.5	Training for identified/appropriate front line staff to be provided by PH across Council Services to promote SSS and referral ensuring consistent message. Counterfeit/illicit tobacco surveillance embedded in routine home checks. Formalised reporting mechanism between Housing and Trading Standards (TS) to support targeted enforcement agenda particularly across high density social housing.	PH co-ordinate across Directorates through Corporate Board/ADs Group.	Mar 2015 onwards	<ul> <li>Stop Smoking Services are being promoted widely as part of the council's Workplace Health &amp; Wellbeing programme.</li> <li>PH and TS leads have met with DACHS T&amp;EM Agreed three actions: <ol> <li>TS to attend team meetings with Housing Managers/ASB Teams. Also discuss other issues TS get involved in (in progress)</li> <li>Look at placing advert into home affairs (ad produced to go in Mar 2015 edition)</li> <li>Link with Housing Support (in progress)</li> </ol> </li> <li>Already increased intelligence being received from housing manager to TS</li> </ul>
3.3	Appoint an elected member, who would not be affected by any aspect of tobacco control to champion work for effective stewardship of strategy; and motivate leaders to support and	PH SSS in consultation with Corporate Resources	Sep 2014	On-going

	embed improvements in strategy for long-term success.			
3.6	Hardwire concession in HWWB/PNA strategy ahead of EU Directive restrict access of tobacco products and E-cigarettes to young people U 18. Implementation of pledge an action campaign encompassing local SME's with underpinning communications plan	PH SSS lead out in consultation with HWBB/Pharmacy Leads/Chamber of Commerce/Council Marcomms.	Mar 2015	This has been superseded with national consultation on Age of Sale for Nicotine Inhaling Products regulation under the children & Families Act. A brief was circulated to Health & Wellbeing & Corporate Board to support this via the Smoke Free Action Coalition. Endorsement sent on 26 <sup>th</sup> Jan 2015 in support.
3.7	TS work with Marcomms to develop and promote a distinct whistle-blow process enabling members and the public to conveniently report cases for further investigation.	TS – DUE	Sept 2014	Using Tobacco Detection dogs has increased capacity, seizures and penalties. Has resulted in increased publicity and intelligence reporting from retailers and member of the public