

FOR PUBLICATION

LOCAL GOVERNMENT DECLARATION ON TOBACCO CONTROL (T000)

MEETING: 1. CABINET
2. EXECUTIVE MEMBER FOR LEISURE
CULTURE & TOURISM

DATE: 1. 21 APRIL 2015
2. 8 APRIL 2015

REPORT BY: ENVIRONMENTAL HEALTH MANAGER

WARD: ALL

COMMUNITY ASSEMBLY: ALL

KEY DECISION REFERENCE: NON-KEY 33

FOR PUBLICATION

BACKGROUND PAPERS FOR PUBLIC REPORTS:

Chesterfield Health Profile 2014 (www.apho.org.uk)
Derbyshire Tobacco Control Alliance Action Plan

1.0 **PURPOSE OF REPORT**

1.1 To ask Members to support the signing of the Local Government Declaration on Tobacco Control (Appendix A)

2.0 **RECOMMENDATIONS**

2.1 That the Council signs the Declaration and commits to supporting its aims.

3.0 **BACKGROUND**

3.1 Smoking is still the single greatest cause of premature death and disease. On average about 20% of adults in Derbyshire are estimated to smoke regularly and Chesterfield is close to the average

equating to over 15,000 people. The greatest prevalence is in routine and manual groups (28.5% in 2013) and given the cost of smoking it disproportionately affects those on low income financially. The estimated cost of domestic fires in Derbyshire is £6.9 million.

- 3.2 In the Chesterfield Health Profile 2014 it states that in 2012 there were 200 smoking related deaths with a rate of smoking related deaths worse than the England average. As well as the financial and health costs to the individual, smoking has societal costs associated with early death, smoking breaks (non-productive time), health care, sickness, passive smoking, domestic fires and smoking litter.
- 3.3 The national tobacco control action plan dates back to 2011 but has since delivered controls on tobacco displays in shops, enhanced smoking cessation services and delivered marketing campaigns. Work continues such as plain packaging and the banning of smoking in cars carrying children, coming into force in October 2015.
- 3.4 The Public Health Outcomes Framework has set national targets relating to smoking. Derbyshire had met the target for smoking prevalence in adults (less than 18.5%) by 2012 but it has worsened again (see Table 1). The target for smoking throughout pregnancy is 11% or less (by the end of 2015) and we are much higher at 15.8%.

Table 1 Smoking Prevalence in Chesterfield

%	Chesterfield	E. Midlands	England
2010	24.1	21.3	20.8
2011	23.9	20.3	20.2
2012	17.9	19.9	19.5
2013	20.3	19.1	18.4

- 3.5 The lead for public health and for the delivery of smoking cessation services is Derbyshire County Council. The borough council is responsible for the enforcement of the Health Act 2006 which protects workers from passive smoke (the “smoking ban”). To reduce health inequalities in the borough, we have developed a partnership action plan for “Smokefree Derbyshire”. One of the aspirations on the action plan is for all partners of the tobacco control alliance to sign the declaration. Table 2 outlines the key objectives of the action plan relevant to us.

Table 2 Tobacco Control Alliance Action Plan 2014-2017

Objective	Actions	Local Position
Continuously improve measured by CLearR	Sign up to Local Government Declaration	
Increase no. of workplaces engaged in smoking cessation	Workplace charter Health champions	Promote the charter to businesses Trained cessation officers
High compliance with smoke free laws	Monitoring visits Response to complaints	Licensing enforcement monitor taxis and premises
Litter enforcement activity related to cigarettes	Targeted work to reduce prevalence of smoking materials esp. in deprived wards	Patrols. Working with businesses to manage public realm
Adoption of voluntary code for smokefree play areas	Group to develop proposals for defined number of play areas	We represent the districts and have play areas in target wards (under 18 smoking prevalence)

- 3.6 The Local Government Declaration is a statement of commitment to ensure tobacco control is part of the Council's functions. Environmental Health and Licensing are already proactive in regulating smoking in public places and reducing smoking related litter. We are also working with the Green Spaces team to develop voluntary controls on smoking in play areas as part of county-wide efforts to "de-normalise" smoking and reduce the likelihood of children taking up smoking as well as reduce the direct health risks.
- 3.7 Leisure Services now has three officers trained in delivering smoking cessation sessions. This means we can provide direct support to our clients seeking a healthier lifestyle.
- 3.8 Officers are currently working with Derbyshire County Council in implementing the new Healthy Workplaces scheme within the borough, and the Council itself. Support for smoking cessation would be provided for employees where that is an identified need.

3.9 The Tobacco Control Alliance will monitor and publish progress with the commitments and our tobacco control actions will be included in our Health Inequalities plans. Objective 7 of the Corporate Plan commits us to improve the health and well-being of people in Chesterfield Borough. Over the next four years we will work with our partners to reduce the gap in health outcomes between the most and least deprived parts of the borough, as measured through the annual health profile. The Declaration, therefore, compliments our ambitions and targets the most significant cause of reduced life expectancy.

4.0 **EQUALITIES**

4.1 The Declaration is a model and as such has been considered nationally for its impact on equalities. The aim is to reduce health inequalities as well as the secondary impacts of smoking (litter, health costs, reduced productivity etc) and as such would have a positive impact on all sections of the community. A preliminary equality impact assessment has been undertaken and no negative impacts have been identified for groups with protected characteristics.

5.0 **FINANCIAL CONSIDERATIONS**

5.1 There are no direct costs associated with adopting the Declaration and delivery can be met from existing budgets with support from the Tobacco Alliance.

6.0 **ALTERNATIVE OPTIONS TO BE CONSIDERED**

6.1 The Council could choose not to adopt the Declaration although this is not recommended as it is anticipated all councils within Derbyshire will sign-up and is part of the strategy to create a “Smokefree Derbyshire”.

7.0 **RISK MANAGEMENT**

7.1 Whilst each Council and NHS partner must individually sign the Declaration, the delivery will be through our public health partnerships. As such some of the risks relate to this shared delivery and the risks are outlined in Table 3.

Table 3 Risk Factors Affecting Adoption of the Declaration

Risk	Likelihood	Impact	Mitigating Action	Revised Likelihood	Residual Impact
We do not meet our commitments	Medium	Low	Active member of the Tobacco Control Alliance that will monitor it as part of their action plan	Low	Low
Adverse publicity	Medium	Medium	County PR sub group to co-ordinate common messages	Low	Low
Partnership does not deliver	Medium	High	Established governance and active membership	Low	Medium

8.0 RECOMMENDATIONS

8.1 That the Council signs the Declaration and commits to supporting its aims.

9.0 REASONS FOR RECOMMENDATIONS

9.1 To reduce smoking related deaths and illness and smoking prevalence within Chesterfield.

RUSSELL SINCLAIR
ENVIRONMENTAL HEALTH MANAGER

Further information can be obtained from Russell Sinclair on Exn 5397

Officer recommendation supported.

A handwritten signature in cursive script that reads "A Surjeant".

Signed

Executive Member

Date 13.4.2015

Consultee Executive Member/Assistant comments (if applicable)