



To: Coventry Health and Wellbeing Board

Date: 20th April 2015

From: Dr Jane Moore, Director of Public Health

Subject: Coventry Smokefree Strategy

1 Purpose

To brief Health and Wellbeing Board members on progress implementing the current Smokefree Strategy and key issues covered by the 2015-2020 strategy.

2 Recommendations

Health and Well-Being Board is recommended to:

- Note progress in implementing the 2010-13 Smokefree Strategy
- Endorse Coventry's Smokefree strategy 2015-2020

3 Information/Background

Smoking kills half of all long term users. It is the single biggest cause of preventable death in the country and is directly responsible for almost 80,000 deaths in England – including approximately 400 deaths in Coventry - every year. From our Household survey data, it is estimated that the proportion of adults who smoke is 22% (2013). According to national data, Coventry's smoking prevalence is the same as the national average.

4. Achievements of Coventry's Smokefree Alliance

Coventry had a Smokefree Strategy which ran from 2010-2013. Coventry's Smokefree Alliance has consisted of a strong group of partners since 2010 that together, has produced many achievements. Some of these include:

- A strong and committed partnership approach to addressing the harms caused by tobacco
- Increased the numbers of people stopping smoking with the help of commissioned services. Between 2010/11 and 2012/13, numbers of people accessing services went from just under 2500 to 3355. In a report published in 2013, 41% of those accessing the stop smoking services had stayed quit 12 months later.

- At least 75% of all service users are from targeting groups (areas of deprivation, under 25yrs, sensory impairment, manual occupation, mental health condition, unemployed or BME).
- High levels of compliance with regulations governing the sale of tobacco products and smoking in enclosed public areas.
- Improved awareness of shisha as a tobacco product. Key messages included the harm it can do to pregnant women, the number of cigarettes smoked it equates to and how sharing mouthpieces can spread diseases. The campaign included displaying information on taxis, engaging with clinicians, children's centres, dentists, using radio adverts and local news interviews.
- The creation of Smokefree areas i.e. school gates, playgrounds, early years settings and UHCW hospital site in Walsgrave (from 1st January 2015) with a subsequent 82% decrease in smoking.
- A reduction in the proportion of pregnant mothers who smoke – down from 15% to 13% (between 2010/11 and 2013/14).
- Seizure of £470,000 of illicit tobacco (2010-14) and 25 related prosecutions (2012-14).

5. The strategy identifies some key next steps which will further help to reduce the impact of tobacco locally:

- Reducing the high levels of people with mental health issues who smoke, building on CWPT's proposal to go Smoke-free.
- Targeting services and health messages at hard to reach groups including families and communities where smoking is the norm.
- Supporting smoke-free workplaces.
- Supporting key influential people (health visitors, midwives etc.) to feel confident in signposting to services or giving a brief intervention.
- Using contractual and other levers to embed stopping smoking support in key care pathways for example for planned operations; appointments for patients with COPD; and midwifery.
- Encouraging all organisations locally to sign up to the local NHS declaration on Tobacco Control.
- Uncertainties with information on the health effects of electronic cigarettes/vaporisers.
- Continue to develop an understanding of the impact and health and other consequences of e-cigarettes.

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Appendices

Coventry's Smokefree Strategy 2015-2020