

Greater Glasgow NHS Board

Board Meeting

Tuesday 18 February 2003

Board Paper No. 2003/ 11

Acting Director of Health Promotion

TOBACCO STRATEGY

Recommendation:

Members are asked to:

- Approve the draft Tobacco Strategy for Glasgow and
- Commit NHS Greater Glasgow to contributing to the strategy’s implementation.

A BACKGROUND

Smoking is the biggest single preventable cause of premature death in Greater Glasgow, (with over 2,500 deaths annually directly attributable to smoking). Glasgow city has the highest rates of smoking in the UK (41%). Smoking is a key factor in health inequalities, with those living in areas of deprivation most likely to smoke (up to 70% smoking rates in some SIPs) and to suffer subsequent ill health and premature death.

While the health improvement performance targets for smoking are challenging for Scotland – they are even more so for Greater Glasgow. We suffer the ‘double whammy’ of high numbers of smokers overall with high concentrations of smokers in areas of deprivation (i.e. those smokers who will find it most difficult to give up).

Scottish Target	Greater Glasgow position
Reduce smoking in young people (12-15) from 14% to 12% by 2005, and to 11% by 2010	Current national figures indicate that 20% of 15 year olds report being smokers (24% of these are girls and 10% are boys)
Reduce the proportion of women who smoke during pregnancy from 29% to 23% by 2005 and to 20% by 2010	31.3% of pregnant women are smokers at their first booking appointment.
Reduce rate of smoking from an average of 35% to 33% by 2005, and to 31% by 2010 among adults	37.5% of Greater Glasgow population and 41.5% of Glasgow city smoke (70% in some SIP areas).

B GLASGOW ALLIANCE DRAFT TOBACCO STRATEGY

The draft Tobacco Strategy, issued for consultation by the Glasgow Alliance sets out a coordinated multi agency approach to tackling smoking

The draft strategy document has been based on work previously carried out by the Tobacco Working Group of the Glasgow Healthy City Partnership. This multi-agency group includes representation from Greater Glasgow NHS Board, various departments of Glasgow City Council, Glasgow Healthy City Partnership, Glasgow Council for Voluntary Service and the Roy Castle Foundation. The draft has now been adopted by the Glasgow Alliance – and all the Alliance partner organisations (i.e. Glasgow City Council, Scottish Enterprise, Communities Scotland, Strathclyde Police, Glasgow Council for Voluntary Organisations, Scottish Business in the Community, Greater Glasgow NHS Board) are therefore expected to give their commitment to playing their part in its implementation.

C AIM AND OBJECTIVES

The strategy aims “ **to promote the health of people living and working in the city of Glasgow by reducing the health impact of tobacco, working particularly in areas of greatest need**”. The document highlights the contribution that coordinated action on tobacco will make to improving not only the health but also the environmental and economic status of people in Glasgow.

It explicitly links the achievement of the aims and objectives of the Tobacco Strategy with the other 4 key strategic objectives of Glasgow Alliance (i.e. a vibrant, learning, safe and prosperous Glasgow). The strategy has the following objectives:

- 1. That lead organisations engage fully with tobacco control.**
- 2. To create a climate which will support activity in relation to tobacco control.**
- 3. To reduce smoking in young people in line with the Scottish Executive targets set out in “Towards a Healthier Scotland” and the White Paper on Tobacco “Smoking Kills”.**
- 4. To encourage and deliver realistic, innovative and sustainable community led work on tobacco.**
- 5. To ensure that the Health Service in Glasgow fulfils its exemplar role and fully capitalises on its unique opportunities for effective action against smoking.**
- 6. To make smoke free public places the norm and to work towards a situation where all employees are protected from Environmental Tobacco Smoke.**
- 7. To use a variety of media effectively to ensure smoking and tobacco issues have due prominence as a public concern.**

D TACKLING TOBACCO : A SUMMARY OF CURRENT ACTIVITY

Coordinating work on tackling tobacco in NHS Greater Glasgow

In past years a lot of work on tackling smoking has been done within Greater Glasgow NHS. However it has been acknowledged that this would be more effective if set within a coordinated, strategic framework. To this end, a Smoking Planning and Implementation Group (PIG) was established in November 2002. The development by the PIG of a strategic framework for work on smoking in NHS Greater Glasgow will be the means by which the NHS contribution to the implementation of Glasgow Tobacco Strategy will be coordinated.

Developing healthy policy and raising public awareness

National legislation (e.g. tobacco advertising ban and restrictions on the sale of tobacco) plays an important role in tackling tobacco, but local public policy such as the Tobacco Strategy for Glasgow is also vital. Other examples include ongoing work to promote smoke free as the norm in workplaces and public places.

Health Promotion staff, in partnership with the Communications Team, are developing a more active engagement with the press on tobacco issues. In addition to supporting the annual public awareness campaigns for National No Smoking Day, GGNHSB will in March/April 2003 market the newly expanded pharmacy smoking cessation service

Work with young people

Health education on tobacco issues has been assimilated into the 5-14 school curriculum through the development of the *Glasgow's Health* curriculum resource, which supports teaching on a range of priority

health issues as appropriate to the different stages in primary education. In addition specific tobacco teaching materials linked to the national curriculum aimed at children in Primary 5, 6 and 7 have been introduced to support the *Smoke Free Me* programme. This programme has to date been provided in schools in West Dumbartonshire and Glasgow (with additional funding from Glasgow City Council enabling it to be rolled out to all Glasgow primary schools within the next 2 years.)

All secondary schools in Greater Glasgow are being invited to participate in the *Smoke Free Class* competition. This initiative follows a format used in 15 European countries and encourages Secondary 1 pupils, through a combination of peer support and reward to remain smoke free.

The need for smoking cessation programmes designed specifically for young people has been identified nationally – but this is an area where there is a lack of evidence based practice. Smoking Concerns, in partnership with Barlanark Health Shop is taking forward a youth smoking cessation pilot project (funded by HEBS).

Smoking cessation support

Most of the projected smoking deaths in the next 50 years are those of existing smokers. Increasing smoking cessation is the only way to make a significant impact on reducing tobacco related mortality and morbidity in that time frame. Published research also highlights that prevention work with young people only succeeds where adult rates of smoking are falling.

The Smoking Concerns team within the Health Promotion Department has taken the lead in work on smoking cessation. Most of this work has been funded through the Health Improvement Fund and funds set aside in the Tobacco White paper *Smoking Kills*. Working from a starting point where there was little research evidence regarding the best approaches and an imperative to get services up and running, the priority has been to pilot and evaluate a range of smoking cessation services to develop services that were proven to be both clinically and cost effective.

In the past 2 years

- 220 health professionals (mainly nurses in primary care) have been trained in brief intervention, enabling them to more effectively encourage patients to consider giving up smoking
- 126 have received training on running intensive group support, to enable them to deliver the ‘approved’ model smoking cessation developed by Smoking Concerns, based on best practice
- 100 community pharmacists have been trained and now deliver the pharmacy smoking cessation support service (providing one to one support for patients prescribed NRT by their doctors)
- 50 community pharmacists participated in a pilot project for direct supply of NRT within the product licence (allowing patients walk-in access to NRT at prescription rate of payment or free if eligible). In April 2003 the scheme will be expanded to include 92 pharmacies
- Each LHCC has been offered funding (£115k per year in total from HIF) to develop intensive group cessation support, and groups are now operating in 15 LHCCs. An application has been made to NOF for funding to support the administration of cessation groups
- In the acute sector, staff have attended brief intervention training (including 12 community /hospital midwives from Queen Mother’s Hospital) and the South Trust has received NOF funding to employ a smoking cessation adviser
- An M. Sc. Pharmacy research project in Glasgow North Hospitals Trust is piloting a smoking cessation service for acute patients, linking with the community pharmacy service.

More work and resources are required to develop effective smoking cessation programmes in the community (especially in deprived communities). An application has been made to NOF Cancer fund to introduce a buddy support system in areas of deprivation. Pregnant women are another key target group and in the coming year Smoking Concerns will work with Princess Royal Maternity Hospital to develop smoking cessation specific to their needs.

A lot has been done, but as the draft strategy highlights “ there is much still to do.”

D. CONCLUSION AND RECOMMENDATIONS

Continued, sustained and coordinated action is required to reduce the impact of tobacco on Glasgow. The development and implementation of Glasgow's Tobacco Strategy is therefore vital to improving the health of the city.

Members are asked to:

- Approve the draft Tobacco Strategy for Glasgow and
- Commit NHS Greater Glasgow to contributing to the strategy's implementation.