

Report to:	Cabinet	Date of Meeting:	7 th February 2019
Subject:	Stop Smoking Service Contract Extension		
Report of:	Director of Public Health	Wards Affected:	All
Cabinet Portfolio:	Health and Wellbeing		
Is this a Key Decision:	Yes	Included in Forward Plan:	Yes
Exempt / Confidential Report:	No		

Summary:

To seek cabinet approval to extend the Stop Smoking Service for a further 12 months, by exercising a plus one year option within the current contract.

To seek delegated authority for the Director of Public Health (in consultation with the Cabinet Member) to award the remaining subsequent extension options if any future extensions of this contract are deemed appropriate and offer value for money.

Recommendation(s):

- (1) For Cabinet to give approval to Public Health to exercise a plus one year extension to the Sefton Stop Smoking Service contract.
- (2) For Cabinet to delegate authority to the Director of Public Health in consultation with the Cabinet Member for Health and Wellbeing, to award future contract extensions within the existing contract term.

Reasons for the Recommendation(s):

The current contract is from April 2017 to March 2019, with the option to extend for a further 3 x 12 month periods. Approval is sought by Cabinet to extend the current commission of the Stop Smoking Service by one additional twelve months to March 2020.

This would enable further review of the service and allow for development of action around smoking in pregnancy, which will influence whether the contract should be varied or recommissioned after this period.

Alternative Options Considered and Rejected: (including any Risk Implications)

1. Full re-procurement of the service; this option is rejected because the service has been operational for less than 2 years. During that time, there has been significant improvements made to the delivery model, focusing on the most vulnerable

people in the population. The service needs time to embed and continue its development to tackle smoking in pregnancy, which is a public health priority.

2. To extend the contract for a further 2 or 3 years by exercising the additional options within the current contract. This option is rejected because of the continued review around smoking priorities, and the possible need to vary the contract to reflect those priorities.

What will it cost and how will it be financed?

(A) Revenue Costs

There are no additional costs. The annual contract is agreed at the existing budget of £665K per annum. This includes the provision of pharmaceutical support and related products.

(B) Capital Costs

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets): Met within existing Public Health budget allocation.
Legal Implications:
Equality Implications: There are no equality implications.

Contribution to the Council's Core Purpose:

(Please give a brief description of how the proposals set out in the report contribute towards the following Council's Core Purpose. Insert 'not applicable' where required).

Protect the most vulnerable: Sefton Stop Smoking Service targets people who are most vulnerable target groups, including people living in the most deprived communities where prevalence is double that of the general population, people experiencing poor mental health and pregnant women.
Facilitate confident and resilient communities: Sefton Stop Smoking Service is a specialist strand of Living Well Sefton (LWS), who's aim is to provide a range health and wellbeing opportunities and support for people in their communities. Supporting people to maintain control over their lives and involving them in shaping services delivery is key.
Commission, broker and provide core services: x
Place – leadership and influencer: n/a

Drivers of change and reform: n/a
Facilitate sustainable economic prosperity:n/a
Greater income for social investment: n/a
Cleaner Greener

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Head of Corporate Resources (FD.5496/18) and Head of Regulation and Compliance (LD.4621/18) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

No External Consultations have taken place

Implementation Date for the Decision

Immediately following the Committee / Council meeting.

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Appendices:

There are no appendices to this report

Background Papers:

None

1. Introduction/Background

1.1 Prevalence

Estimated smoking prevalence across the whole of Sefton is 12.4%; however, this masks much higher prevalence in some of Sefton's most deprived wards, where up to 50% of people smoke tobacco and therefore exposed to more concentrated risk from harm. Smoking related deaths in Sefton are significantly worse than the rest of England equating to 574 deaths per year.

Smoking remains by far the single biggest preventable cause of death and illness in England and the single most important driver of health inequalities. Smoking is much more common amongst unskilled and low-income workers than amongst high earners. The more disadvantaged a person is, the more likely they are to smoke and suffer smoking related illness and premature death. Smoking rates are also higher amongst people experiencing poor mental health, prisoners, looked after children and LGBT people.

Smoking is transmitted across the generations in a cycle underpinned by social norms, familiarisation and addiction. In poorer communities, young people are more exposed to smoking behavior, more likely to try smoking and once hooked find it harder to quit.

Smoking is so corrosive to individual, family and community health that any success in reducing smoking in disadvantaged groups has knock on benefits for the wider determinants, not least poverty. (*ASH, Health Inequalities and Smoking 2016*)

1.2. Sefton Stop Smoking Service

Sefton Council have contracted Solutions 4 Health to deliver a specialist stop smoking service for Sefton. An annual budget of £665K for a contract period of 2 years with 3 plus one year options was implemented in April 2017.

Solutions 4 Health is commissioned to provide an evidence-based specialised support service for people wanting to give up smoking, or reduce harm with a view to quitting in the longer term.

The service is driven to achieve a reduction in smoking prevalence in adults who require the most support, including people with poor mental health, pregnant women and people living in areas of greatest deprivation and to contribute to Sefton's Living Well Sefton Service (LWS) by:

- Acting as a specialist spoke, to assist residents across all age groups to stop smoking
- Offering stop smoking advice and providing a range of free, person centred, interventions using behaviour change techniques and motivational interviewing to tailor health, wellbeing and lifestyle support
- Providing support and training to all those involved in encouraging and supporting people to reduce harm and stop smoking.
- Focusing specifically on health inequalities and on improving health and wellbeing outcomes for residents of the borough and improve the health of the poorest.

2.0 Review

2.1 Performance

A review of the service was completed in May 2018 reflecting on the most recent full year's activity covering the period April 2017 – 31st March 2018.

The service performed well over all, supporting 2040 people to set a quit date during that time and 48% of those people going on to quit. 78% (228) of people who set a harm reduction date, reduced their consumption by 50%.

Over half of clients (1048) supported by the service came from the top 10% most deprived wards achieving a quit rate of 42%. Amongst people experiencing poor mental health who accessed the service (396), 38% went on to quit. This is lower than the service target of 40%. 42% of pregnant women who accessed the service went on to quit (however, numbers are small). The service has concentrated efforts in areas greatest challenge and has continued to improve performance in 2017/18.

2.1 Areas of Deprivation

The service has targeted service promotion within areas of deprivation with a view to reaching people, who have never previously accessed the service. This has been supported by the introduction of a mobile unit 'Wellness on Wheels' which is used to set up stop smoking support sessions in communities, workplaces and at events.

The service is now more flexible offering support in venues and at times that suit local people, includes evenings and weekends.

The service has prioritised working with community partners, delivering brief advice training to staff and strengthening referral processes. The service has updated its communication methods to include social media, interactive website and online chat to provide round the clock support.

It is acknowledged that for some people who find it more difficult to quit, a harm reduction approach is more effective, staff have been supporting many people this way, resulting greater uptake amongst routine and manual workers.

2.3 Smoking in Pregnancy

Smoking pregnancy is a complex issue with many challenges. The service has worked tirelessly with Southport and Ormskirk and Liverpool Women's maternity units to improve the number and quality of referrals in to the service. As a result, the numbers of referrals have increased but not significantly. Public Health is working to address smoking in pregnancy at a regional level, as described in the SATOD report.

The service has developed a bespoke offer for pregnant women who access the service 'Me Time' offers holistic support to expectant mums, and includes home visits, relaxation, nutrition and physical activity sessions in addition to, smoking cessation.

2.4 Mental Health

The service has worked closely with Merseycare to improve smoking support for people who experience poor mental health. A data sharing agreement has been established and training has been provided for staff. Clinics are now being delivered in mental health community venues.

2.5 Pharmacies

Solutions for Health have successfully taken over management of the pharmacy contracts including the provision and governance of pharmaceutical support.

A review and redesign of the pharmacy offer has been completed. This includes the introduction of a new database which will capture additional information and reduce lost to follow ups and improved quit rates. Tariffs have been revised prioritising outcomes for clients rather than activity. SLA's have been established and new pharmacies signed up to ensure good coverage across the whole of Sefton. The revised offer includes;

- 22 Pharmacies providing Level 2 Services (advice and support to quit)
- 42 Pharmacies Supplying Champix under the PGD

4.0 Next Steps

A one year extension to the current contract is required to build on early successes and consolidate progress to date. This will be delivered within the existing annual budget.