

**SUNDERLAND
TOBACCO ALLIANCE**

ACTION PLAN 2008/2009

Draft 4

December 2008

Sunderland Tobacco Alliance

Context for the 2008/2009 Tobacco Alliance Action Plan

1. Smoking rates in Sunderland

- 1.1. Smoking prevalence in Sunderland is still much higher than the average for England (32% compared to an average of 26%). Levels are estimated to be up to 45% in some wards in Sunderland.
- 1.2. Lifestyle Survey Information for adults.
- 1.3. Smoking in pregnancy has seen an improvement during the period from 2004 to 2007. The figure for women smoking in pregnancy in 2004/05 was approximately 38%, compared with 25% and 27% in Gateshead and South Tyneside respectively. The figure for Sunderland in 2006/07 was 23% compared with 20% and 29% in Gateshead and South Tyneside respectively. The Sunderland Joint Strategic Needs Assessment recognises that, although progress is being made, the city needs to find innovative ways to work with mothers to significantly improve these figures.
- 1.4. The estimates for young people smoking are provided by surveys carried out within South of Tyne and Wear by the School Health Education Unit at the University of Exeter (SHEU). The SHEU implement surveys on behalf of many Primary Care Trusts across England using an identical "Health-Related Behaviour Questionnaire".
- 1.5. Young women are taking up smoking in increasing numbers and there are now higher death rates from lung cancer for women than for men, with rates for both much higher than across England.
- 1.6. Sunderland Voluntary Service Youth Forum is currently undertaking a comprehensive city-wide consultation with young people from every area of the city, with around 5000 young people completing the questionnaire. This information will soon be available to the Tobacco Alliance to inform and shape a response to the issues related to young people and smoking.
- 1.7. The estimated smoking rate for boys (Year 10) in Sunderland for 2006 is 12%, which is less than the national average for England. This rate has remained relatively constant for the period since 2002 when it was estimated to be 11%.
- 1.8. The estimated smoking rate for girls (Year 10) is significantly higher than for boys both within a Sunderland and England context. For Sunderland the smoking rate for girls in 2006 was 23%. Although this is higher than the rate for boys in Sunderland it is in line with the rate for girls when compared with the rates across England (20%).

2. Impact of smoking on life expectancy

- 2.1. Progress has been made locally in reducing the number of early deaths from the major killers, cancer and coronary heart disease. Average life expectancy in Sunderland has increased consistently over the last ten years and is now 75.3 years for men and 79.4 years for women. However, there have also been reductions across England, and the gap between Sunderland and England has narrowed only slightly.

- 2.2. Adult men in Sunderland still die on average almost 2 years earlier than the average for England and women in Sunderland live on average four years longer than men. Furthermore, across Sunderland's electoral wards there can be up to a nine year gap in life expectancy for babies born on the same day, between the best off and the most disadvantaged wards.

3. Tobacco planning and coordination

- 3.1. The Sunderland Strategy 2008 – 2025 has made a commitment that everyone in Sunderland will have the opportunity to live long, healthy, happy and independent lives. Within this context, the strategy aims to ensure that, by 2025, levels of initiating smoking in young people, and in particular in young women, will have reduced to under 10%. In addition, smoking prevalence will be reduced to 15% and there will be no difference between wards. Finally, the level of smoking in pregnancy will have reduced to less than 5%.
- 3.2. Sunderland Local Area Agreement supports the achievement of the long term strategy for smoking by making a short term commitment that by 2010, there will have been at least a 10% reduction in the gap between the 20% of areas with the lowest life expectancy at birth and the population at whole. Furthermore, by 2010, there will be at least a 40% reduction in mortality rates from heart disease in people under 75, and by at least 20% in cancer in people under 75. Finally, by 2010, the incidence of smoking will have reduced by 24% and the Partnership will have implemented the Smoke Free City Strategy. The achievement of 4 week smoking quit targets is seen as a key priority for the City.
- 3.3. The current Joint Strategic Needs Assessment (JSNA) identifies a range of commissioning priorities relating to children and young people and smoking as follows:
- Reduce further the percentage of women smoking during pregnancy, e.g. by offering structured interventions and support throughout pregnancy and during the post natal period. Increase investment in local services to support pregnant women to stop smoking
 - Develop a holistic approach to reducing risk taking behaviours in children and young people (smoking, alcohol consumption, drug taking and risky sexual behaviours). The Risk and Resilience Board will tackle these issues on a multi agency basis. A new approach to smoking and young people will be introduced with a focus on youth advocacy.
- 3.4. An additional outcome of the JSNA during 2007/08 has been an ambitious programme to 'Bridge the Gap' in life expectancy. The Bridging the Gap work is an umbrella term for a comprehensive programme of work seeking to reduce deaths due to circulatory disease and associated lifestyle factors. Specific priorities within this context include an increased focus on reaching smokers in routine and manual groups, pregnant women and more flexibly delivered services in evenings and weekends. In addition increased investment is to be directed towards the Third Sector to increase their important role in reaching people with brief interventions.
- 3.5. The City of Sunderland's Health Thematic Partnership is currently responsible for the development of the Improving Health and Social Care Priority of the Sunderland Strategy. The Partnership co-ordinates and performance manages the two strands of the LAA Healthier Communities and Older People block, and within this has responsibility for implementing the Tobacco Control Strategy to achieve a Smoke Free Sunderland. The Tobacco Alliance therefore needs to be strategically aligned against the work of this Health Thematic Partnership and also aligned with the Children's Trust

arrangements at a strategic level. This reflects the importance placed on issues of reducing tobacco use by children by the Alliance and the need to fully re-engage with Children's Services.

- 3.6. Of the three Tobacco Alliances across the South of Tyne and Wear area, Sunderland Tobacco Alliance has been in existence the longest, however, there is recognition that the group has not been as active in recent times. At a South of Tyne and Wear Tobacco Alliance workshop in January of this year, Sunderland Tobacco Alliance partners identified a commitment to re-establish and re-invigorate the group.
- 3.7. Furthermore, the group identified a number key priorities including; ensuring there is strong leadership from key individuals; reviewing membership and engagement of key people and partners; focus on programmes of education targeted at preventing young people from starting to smoke; embed clear governance arrangements; develop systems of accountability to ensure delivery takes place; ensure that clear messages are promoted and there is a strong brand.
- 3.8. As a consequence, the Alliance is currently re-establishing its vision and purpose and in particular to recognize the importance of partnership working in terms of delivering this agenda. This process will be completed by Autumn 2008 and will form the basis of the Alliance commencing its strategic planning process that will culminate in a revised strategic action plan by March 2009.

LOCAL TOBACCO ACTION PLAN

1. Developing infrastructure, skills and capacity at local level and influencing national and international action

What will be achieved?	How it will be achieved?	Measurable outcome/Process	Lead/Partner agencies
<p>Reestablishment of the Sunderland Tobacco Alliance</p>	<p>The development and submission to FRESH of the Sunderland Tobacco Alliance Action Plan 2008/2009</p> <p>Sunderland Tobacco Alliance will be reconvened in early August to review and sign off the FRESH Action Plan. This meeting will also enable the group to:</p> <ul style="list-style-type: none"> • Establish a clear vision and purpose • Develop the partnership and group membership • Identify appropriate governance arrangements • Agree systems and processes for effective partnership working • Identify an approach to monitoring performance and demonstrating impact 	<p>Appropriate statement of the purpose and membership of the Alliance developed and agreed.</p> <p>Relationships with other key bodies established and communicated as part of this process</p> <p>Re-establishment of a regular cycle of Tobacco Alliance meetings and activity</p> <p>Review of progress against 2008/2009 Tobacco Alliance Plan</p> <p>Development of the 2009/2010 Tobacco Alliance Plan – Feb 2009</p>	<p>PCT Locality Coordinator/</p>
<p>Ensure effective partnership working</p>	<p>Provision of leadership and operational support for Sunderland Tobacco Alliance</p> <p>Co-ordination of Alliance meetings and ongoing administrative support</p> <p>Undertake an annual Partnership Effectiveness exercise as part of the strategic planning process</p>	<p>Measure of Partnership Effectiveness</p> <p>Programme of Alliance Meetings</p> <p>Planned for 2009</p>	<p>PCT Locality Coordinator/ Relevant partner agencies to be confirmed as discussion are progressed</p>

Increase skills and capacity of Staff across Sunderland regarding smoking	BiT for third Sector BiT for statutory sector		
Respond to National Tobacco Strategy consultation			

1. Developing infrastructure, skills and capacity at local level and influencing national and international action			
What will be achieved?	How it will be achieved?	Measurable outcome/Process	Lead/Partner agencies
Ensure local strategic commitment to the tobacco agenda	Facilitate and manage the Tobacco Control National Support Team's (NST) visit to Sunderland Strategic representation by Sunderland Director of Public Health on Sunderland Strategic Partnership Board and appropriate themed groups Development of a strategic plan for Tobacco Control that is signed up to by all local partners	Feedback from National Team on strengths, weaknesses and areas for improvement DPH on relevant groups To be finalised	PCT Locality Co-ordinator Sunderland Director of Public Health Locality Lead
Support for regional action for Tobacco Control Ensure staff have access to Regional/National Events	Sunderland Director of Public Health to represent the local Tobacco Alliance on appropriate regional structures, including the Regional Advisory Group for Tobacco Control Dissemination of information FRESH updates at local alliance	Regional and local action is informed and guided by each other Attendance on RAG agreed On-going via e-mail Updates take place with feedback from events	Sunderland Director of Public Health Locality Lead All Members

<p>Making smoking cessation everyone's business</p>	<p>Build on the PCT investment in the Stop Smoking Service to build the capacity and capability of the wider workforce</p> <p>Provision of evidence-based programme of learning for Intermediate advisers</p> <p>Provision of evidence-based programme of brief intervention training</p> <p>Develop a clear understanding with the Third Sector as to their role in providing brief intervention and other support</p>	<p>Number of trained advisers at both levels</p> <p>Number of support sessions provided</p> <p>Number of people stopping smoking as a direct result of the support provided</p>	<p>Sunderland Stop Smoking Service/ City Council Environmental Health and Wellness teams</p>
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3. Building NHS Stop Smoking Services and strengthening local action

What will be achieved?	How will it be achieved?	Measurable outcome/process	Lead/Partner agencies
<p>The Sunderland Stop Smoking Service will deliver a more effective locally focused service on the ground as a consequence of being more actively engaged in the Tobacco Alliance,</p>	<p>The Specialist Service team will be directly represented in Tobacco Alliance membership</p> <p>Local Service Action Plans will be developed, which will relate to and inform Tobacco Alliance activities and Action Plans</p>	<p>Attendance at meetings</p> <p>Monitor progress against agreed set timescales</p>	<p>Sunderland Stop Smoking Service/ Other partners to be identified as part of current discussions</p>
<p>Specific actions targeted at reducing smoking amongst women during pregnancy and at birth</p>	<p>The development and delivery of a peer support group. As part of this process local volunteers will undertake a programme of learning to ensure that appropriate and consistent messages are shared with clients.</p> <p>An incentive scheme to encourage smokers to attend for appointment</p>	<p>Number of women smoking during pregnancy and at birth</p>	<p>Sunderland Smoking In Pregnancy Service</p>
<p>Work with business proprietors to encourage and assist employees to stop smoking</p>	<p>Direct mailing of information to local businesses to raise awareness and understanding of the service</p> <p>Programme of follow-up calls to encourage local businesses to participate</p> <p>Provision of an onsite 8 week programme of drop-in sessions for employees</p> <p>Application of evidence based smoking cessation methodology as part of the individual drop-in session interviews with employees</p>	<p>Number of businesses targeted</p> <p>Number of businesses participating on the programme</p> <p>Number of individuals seeking advice</p> <p>Number of individuals stopping smoking</p>	<p>Sunderland City Council/ Sunderland Stop Smoking Service</p>

3. Building NHS Stop Smoking Services and strengthening local action

What will be achieved?	How will it be achieved?	Measurable outcome/process	Lead/Partner agencies
<p>Targeted action for specific disadvantaged wards in Sunderland</p> <p>Increase Number of Intermediate Advisers</p> <p>Develop Brief Intervention training with the Third Sector</p> <p>Assess contribution all partners can make to increase referrals</p>	<p>Continued support for Health Trainers in Hendon to provide community focused information advice and guidance</p> <p>Provision of health check service specifically for smoking to enable local people to assess the impact of smoking on their health</p> <p>Programme of promotional events to raise awareness of the Health Trainer programme and specific information on public health issues and other Alliance action</p>	<p>Number of referrals made to specialist smoking cessation service</p> <p>Number of local people stopping smoking as a result of the Health Trainer programme</p> <p>Engage with all key partners</p> <ul style="list-style-type: none"> • Wellness • SAFC • Adult care • Children's Services • CVS 	<p>Back on the Map and Sunderland Health Trainer Service</p> <p>All wellness staff trained</p>

3. Building NHS Stop Smoking Services and strengthening local action

What will be achieved?	How will it be achieved?	Measurable outcome/process	Lead/Partner agencies
Targeted support for young people to stop smoking	<p>Engage the College and University in a review of how they can support the reduction of smoking rates for young people/adults/staff</p> <p>Building on up-skilling and capacity development identified in Section 1, encourage frontline staff to offer brief intervention signpost young people to appropriate service provision.</p> <p>Carry out Smoke Free School Awards and Healthy School Award</p> <p>Develop tobacco as a key element within risk and resilience board</p>	<p>Number of young people supported to stop smoking</p> <p>Number of young people who smoke</p> <p>Number of young people who have stopped smoking as a direct result of this intervention</p> <p>Number of neighbourhood based youth organisations trained and delivering support to young people</p>	<p>Sunderland Stop Smoking Service</p> <p>Youth work providers</p>

4. Media, communications, social marketing and education			
What will be achieved?	How it will be achieved?	Measurable outcome/process	Lead/Partner agencies
Development of the strategic focus for work with young people and tobacco usage	<p>Enable Young People to express their views on smoking and inform the development of the National Tobacco Control Strategy</p> <p>Share the findings from the consultation exercise with young people with the wider Alliance and feed into the strategic planning process</p> <p>Sunderland Children's Trust is developing and Risk and Resilience Strategy which outlines the universal, targeted and specialist services which Sunderland Children's Trust will secure to help improve sexual health, substance misuse and smoking outcomes</p> <p>As part of this process a detailed review of Government policy and guidance is to be undertaken along with a needs assessment, audit of current provision.</p> <p>Undertake a programme of consultations with children, young people, parents and carers. As part of this process SVSYF will undertake a comprehensive consultation exercise with young people on a range of issues, but including smoking. This work will be launched during National Youth Work Week</p> <p>Build stronger links with the Youth Parliament</p>	<p>Consultation Workshop for young people to be held in August that will involve young people working with a theatre group</p> <p>Consultation DVD that will be sent to the FRESH National campaign</p> <p>The Risk and Resilience Strategy reflects the Tobacco Alliance agenda</p> <p>Strategic Plan signed off by Sunderland Children's Trust</p>	<p>SVSYF/Sunderland PCT Lead for Young People's Risk and Resilience</p> <p>Sunderland Children's Trust/ Sunderland PCT Children's Commissioning Lead</p>

4. Media, communications, social marketing and education			
What will be achieved?	How it will be achieved?	Measurable outcome/process	Lead/Partner agencies
4.1 Develop local media and marketing in line with FRESH NE	Back to Basics Campaign Round the Corner Campaign Co-Ordinate No Smoking Day Undertake social marketing to segment market and target approaches accordingly Develop an education approach with children and young people Engage communication leads across organisations Engage with partners via Area arrangements		

5. Reducing the availability and supply of tobacco products – licit and illicit – and addressing the supply of tobacco to children			
What will be achieved?	How it will be achieved?	Measurable outcome/process	Lead/Partner agencies
Support the development of a regional approach to reducing the availability and supply of tobacco products	<p>Appointment of a North East Project Officer to co-ordinate and develop joint regional working in the field of tobacco control, particularly relating to:</p> <ul style="list-style-type: none"> • Reducing the number of illegal sales to under age people • Disruption of the sale of illegal and counterfeit tobacco products • Enforcement of the prohibition on tobacco advertising • Research into the availability of alternative tobacco products • Improve the sharing of best practice across the North East network <p>Work closely with the North of England Multi-agency Group focusing on smuggled and counterfeit tobacco – to engage customs, police and trading standards</p>	<p>Appointment of North East Project Officer</p> <p>Number of illegal sales to under age people</p> <p>Number of successful prosecutions</p>	North East Trading Standards Association

5. Reducing the availability and supply of tobacco products – licit and illicit – and addressing the supply of tobacco to children

What will be achieved?	How it will be achieved?	Measurable outcome/process	Lead/Partner agencies
Target Underage Sales (contd.)	<p>Review the overall approach to underage sales in light of the outcomes from the National Tobacco Strategy consultation process</p> <p>To provide information and conferences for retailers to prevent under age sales, including specific advice on the change in age limit for sales of tobacco from 1st October 2007.</p> <p>Utilise child volunteers for attempt test purchases at retail premises, this will be done in conjunction with alcohol sales and bring prosecutions where appropriate;</p> <p>Investigate complaints received from the public about under age sales; and during routine inspections, to verify the display of warning notices and the packaging of cigarettes on display.</p>	<p>Number of responsible retailer awards</p> <p>Number of retailers advised</p> <p>Number of test purchases undertaken</p> <p>Number of formal warnings and prosecutions</p>	Smoke free environments officer

6. Tobacco Regulation			
What will be achieved?	How it will be achieved?	Measurable outcome/process	Lead/Partner agencies
<p>Ensure smoke free compliance</p> <p>Target “hot” spots and areas of concern</p>	<p>Programme of smoke free compliance checks to businesses including public transport</p> <p>Provision of guidance and support to new and existing businesses</p> <p>Programme of smoke free compliance checks to businesses including public transport, taxis and work vehicles</p>	<p>Smoke free programme for year completed</p> <p>Advice and guidance provided to all businesses on request.</p>	<p>Council Environmental Health</p>

7. Reducing tobacco promotion within the North East			
What will be achieved?	How it will be achieved?	Measurable outcome/process	Lead/Partner agencies
<p>Reduce sale of tobacco products to young people</p>	<p>Undertake a review of current signage and display in retail premises</p> <p>Review levels of access to vending machines by young people</p> <p>Subject to the outcomes from the National Tobacco Strategy consultation:</p> <ul style="list-style-type: none"> • End all displays of tobacco products at point of sale • Remove vending machines • Introduce plain packaging 	<p>Reduction in young persons smoking rates</p>	<p>Trading Standards Smoke Free Environment Officer/ PCT Tobacco Lead</p>

8. Research, Monitoring and Evaluation			
What will be achieved?	How it will be achieved?	Measurable outcome/process	Lead/Partner agencies
Establish an improved immediate understanding of the nature of tobacco use and local variations	Collate and aggregate existing data and information Review by Public Health analyst	Improved understanding of root causes of tobacco use	Sunderland PCT Locality Lead for Smoking
Understand FRESH role in research and evaluation			
Monitor LAA vital signs 4 week quit target	Regular performance meetings Report to DH/SHA		