



**FOR PUBLICATION**

**DERBYSHIRE COUNTY COUNCIL**

**DERBYSHIRE HEALTH AND WELLBEING BOARD**

**30 January 2025**

**Report of the Director of Public Health**

**Tobacco Control System Update**

## **1. Purpose**

- 1.1 The Health and Wellbeing Board is asked to:
- a) Note the update on the development of a comprehensive tobacco control framework and actions in Derbyshire
  - b) Note the summary of the tobacco control work planned for the next 12 months

## **2. Information and Analysis**

- 2.1 Smoking is the leading cause of preventable illness and premature death in England, with about half of all lifelong smokers dying prematurely, losing on average around 10 years of life. Smoking is the single largest cause of this gap in life expectancy.
- 2.2 In Derbyshire, the latest prevalence estimates for 2023 are 12% of adults aged 18+ which is 90,000 smokers. Of these smokers there are approximately 1500 hospital admissions and 1000 deaths per year.
- 2.3 Tobacco smoking is the largest modifiable risk factor for health and has a significant impact on employees and their productivity.
- Working age smokers are more likely than non-smokers to become ill. This increases the likelihood of being out of work and reducing the average wages of smokers.

- Smokers are also more likely to die while they are still of working age. Dying early is a tragedy for our communities and creates an economic loss
- Economic analysis commissioned by Action on Smoking and Health (ASH) found that if the country could stub out smoking for good the economic benefits would be wide. When smokers switch their spending from tobacco to other goods and services this provides further economic benefits. In total this would generate around half a million jobs, with a net benefit to public finances of £600m.

2.4 Smoking and wider tobacco control have been prioritised nationally with:

- the tobacco and vapes bill currently going through parliament
- additional money for local authority stop smoking services
- funding and a commitment in NHS long term plan to provide all smokers in hospital, pregnant women and long-term users of mental health services with tobacco dependence treatment.

2.5 Smoking and tobacco control has been prioritised locally through the revised Derbyshire [health and wellbeing strategy](#) and [ICS strategy](#).

2.6 In this wider context of an increased focus on smoking and tobacco control, there has been a rapid growth in activity in the last 12 months, a summary of achievements is given below:

- Integrated care sprint and tobacco becoming a system priority
- Relunched tobacco control joint working between local authorities
- Co production of the Smokefree vision and ambition
- Creation of Derby Derbyshire Tobacco Control Board (DDTCSB), tactical and operational groups
- Receiving the additional Stopping the Start Funding
- Procurement of a communications and marketing partner
- Creation of a roadmap, operating model, strategic framework, action plan and mission pack to support the Tobacco board
- Healthwatch insight work into our target communities
- Procurement of marketing campaign
- Trading standards additional money to support enforcement, disposal and legal costs around illicit tobacco and vapes
- Pilot projects in community food pantry, respiratory services like Pulmonary Rehab
- Supporting workplaces to become smokefree by providing advice and access to support to quit on-site

2.7 There are a number of workstreams planned for the next 12 months:

## **National and Local**

- Start of the marketing campaign to promote Smokefree Derby and Derbyshire:
  - a) General campaign in March 25
  - b) Social housing tenants
  - c) Routine and manual workers
  - d) Plus one more priority group to be identified.
- Tobacco and Vapes Bill further readings
- Year 2 of additional Stopping the Start funding
- Ban on disposable vapes (June 2025)
- Derby and Derbyshire smokefree pledge launched
- Establish a smokefree pledge Community of Interest (COI) to provide peer support

## **Stop Smoking Services**

- Improved tobacco dependency referral pathways and support for Serious Mental Illness (SMI) population
- Targeted stop smoking outreach programmes for priority groups including; social housing, SMI, young people, probation and routine and manual workers
- Primary care engagement and insight to drive referrals into stop smoking services
- Support NHS sites with a staff stop smoking offer and achieving smoke free status
- Outpatient referrals from University Hospitals of Derby and Burton (UHDB)
- Maternity incentives to quitting smoking

2.8 ASH have identified the promotion of smoke free environments as one of its top ten high impact actions for local authorities and partners to signal support for tobacco control and to de-normalise smoking. ASH have created two pledges, one for NHS organisations, and one for local authorities (Derbyshire County Council is signed up to the local authorities' pledge). The benefits of the pledge include acknowledgement that the use of tobacco is an addiction, tobacco impact on communities and the key role all partners must play in helping people to quit.

2.9 It was proposed by the DDTCSB that a single, localised version of the pledge was created combining elements of both pledges, so that organisations across the ICS footprint can sign up to become 'smokefree'. There will also be guidance developed and a peer support group to support partners who sign up to the Derby and Derbyshire Smokefree pledge.

2.10 There will be further codesign and engagement with the DDTCSB, the three operational groups and system partners to inform development and refinement of the Derby and Derbyshire Smokefree pledge.

### **3. Alternative Options Considered**

3.1 No alternatives. This report for information only to note the update on the development of a comprehensive tobacco control framework, actions in Derbyshire and planned activity for the next 12 months.

### **4. Implications**

4.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

### **5. Consultation**

5.1 There has been no specific formal public consultation on the development of a Derby and Derbyshire Smokefree pledge. The pledge has been reviewed by stakeholders from across the ICS. Public consultation is not required (ASH).

### **6. Partnership Opportunities**

6.1 Partners are asked to agree in principle the Derby and Derbyshire Pledge, acknowledge the whole system approach needed to tackle smoking as both a major avoidable cause of death, illness and health inequalities but also sickness absence and lost productivity, and commit to taking the pledge to their own organisations for sign up. This will have multiple benefits for partners in terms of reduced costs from sickness absence, a healthier workforce, customer base and community.

### **7. Background Papers**

7.1 [ASH NHS pledge](#)

7.2 [ASH NHS pledge briefing](#)

7.3 [ASH LA declaration](#)

### **8. Appendices**

8.1 Appendix 1 – Implications.

### **9. Recommendation(s)**

That the Health and Wellbeing Board:

- a) Note the update on the development of a comprehensive tobacco control framework and actions in Derbyshire
- b) Note the summary of the tobacco control work planned for the next 12 months

## **10. Reasons for Recommendation(s)**

- 10.1 a) To keep the Health and Wellbeing Board informed of the tobacco control work in Derbyshire and encourage partners have an active role in the planned tobacco control activity.

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**Organisation:** Derbyshire County Council, Public Health

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### **Implications**

#### **Financial**

- 1.1 Smoking costs Derbyshire an estimated £749 million per year (ASH) with direct health costs of £33.3 million and social care costs of £25 million. The average smoker spends £2486 per year on tobacco.

#### **Legal**

- 2.1 The tobacco and vapes bill is currently passing through parliament. If passed, it will contain an expansion of current smokefree legislation and extend this to specific settings expected to include healthcare and schools. A Derby and Derbyshire pledge with a peer support group will support compliance with existing and implementation of new legislation and will also seek to extend the smokefree benefits beyond the legal requirements.

#### **Human Resources**

- 3.1 Smoking causes Derbyshire an estimated £132 million in lost earnings and £79.5 million in smoking related unemployment.

#### **Equalities Impact**

- 4.1 Smoking is responsible for half the difference in health inequalities between the most and least affluent populations in Derbyshire. Achieving smokefree status in organisations and buildings across Derbyshire supported by a pledge, will reduce the visibility of smoking further supporting those that wish to quit.

#### **Partnerships**

- 5.1 All health and wellbeing partners are encouraged to have an active role in the planned tobacco control activity.

#### **Health and Wellbeing Strategy Areas of Focus**

- 6.1 This report relates to:

- Area of Focus 1: Tackle the four main risk factors that lead to poor health

## **Other implications**

7.1 None