



# Welcome

**Creating a tobacco-free future  
in Cheshire and Merseyside**

**#AllTogetherSmokefreeCM**

Working together to improve health and  
wellbeing in Cheshire and Merseyside

**Scan the QR code to see  
today's agenda**





# Chair's welcome

**Dr Ruth Hussey CB, OBE, DL**

Non-Executive Member

NHS Cheshire and Merseyside Integrated Care Board

#AllTogetherSmokefreeCM

Working together to improve health and wellbeing in Cheshire and Merseyside

# Today's event

- Organised on behalf of the nine **Directors of Public Health**, based in Local Authorities, and the **Director of Population Health**, based in the Integrated Care System
- We work together as a **Public Health Collaborative** with our **system partners** to improve **health outcomes** and **tackle inequalities**
- To find out more sign up to our newsletter  
**Collaborate**: [champspublichealth.com/newsletters](https://champspublichealth.com/newsletters)



# Housekeeping

- Turn off mobile phones or place on silent mode
- Location of exits and toilets
- Fire test
- Champs Support Team are on hand to help
- There will be a break at 11.30am and colleagues are welcome to stay and network after the event closes at 1pm
- Social media hashtag is **#AllTogetherSmokefreeCM**



# Welcome to the future of Cheshire and Merseyside

**Councillor Louise Gittins**

Leader of Cheshire West and Chester Council

Chair of the Cheshire and Merseyside Health and Care Partnership

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Working together to improve health and  
wellbeing in Cheshire and Merseyside

# All Together Fairer – The Cheshire and Merseyside Health and Care Partnership strategy



# Tackling tobacco is vital to meet key aims of Integrated Care Systems (ICSs)

- The independent Hewitt review encourages ICSs to shift their focus to prevention and the Khan Review also recommended prioritising tackling smoking
- Tackling smoking essential in improving all disease areas identified for the major condition's strategy
- Saves lives, reduces admissions and readmission and saves millions for the NHS

## The Khan review

### Making smoking obsolete

Independent review into smokefree 2030 policies  
Dr Javed Khan OBE

Published 9 June 2022

## The Hewitt Review

An independent review of integrated care systems

Rt Hon Patricia Hewitt

Published 4 April 2023









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# Delivering on Smokefree 2030 – a national perspective

**Rebecca Lawrence**

Head of Tobacco Policy

Office for Health Improvement and Disparities, Department of Health and Social Care

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Department  
of Health &  
Social Care

# **Delivering on a Smokefree 2030**

A national perspective

23/04/2024

# Creating a Smokefree Generation

The **Tobacco and Vapes Bill** includes measures to:

- Make it an offence to sell tobacco products to anyone born on or after 1 January 2009
- Apply this to proxy purchasing
- Include all tobacco products and cigarette paper in scope
- Come into force on 1 January 2027



# Cracking Down on Youth Vaping

We are reducing the availability and appeal of vapes to children by introducing:

- **Powers** via the Tobacco and Vapes Bill for Ministers to **restrict flavours, packaging and point of sale displays of vape and other nicotine products** (e.g. pouches)
- A **ban on disposable vapes** through the Environment Act
- A new **vape duty** and increase in tobacco duty



# Strengthening Enforcement

We are supporting the implementation of these measures by:

- Introducing £100 'on the spot' **Fixed Penalty Notices**
- Investing **£30 million of new funding** per year for enforcement agencies



# Supporting Smokers to Quit

We are increasing in **smoking cessation funding** via:

- An additional £70 million a year for local stop smoking services
- £15 million a year to fund national tobacco marketing campaigns
- Rolling out a national 'swap to stop' scheme
- Financial incentives scheme for pregnant smokers





# What happens next?

Commons '**Second Reading**' of the Tobacco and Vapes Bill 16th April. 383 MPs supported the Bill, 67 opposed.

Commons '**Committee Stage**' end of April/May.



# Delivering on Smokefree 2030 – a national perspective

**Rebecca Lawrence**

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Office for Health Improvement and Disparities, Department of Health and Social Care

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# Accelerating a Smokefree Generation through a Smokefree Cheshire and Merseyside Framework

**Ian Ashworth**

Director of Population Health  
NHS Cheshire and Merseyside

**Dr Sarah McNulty**

Director of Public Health for Knowsley  
Lead Director of Public Health for  
Smokefree Cheshire and Merseyside

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## Our vision

# All Together Smokefree

**End smoking. Everywhere. For everyone.**

**Interim target:** Deliver a Smokefree 2030 that is fair and equitable for Cheshire and Merseyside's adult population, and a tobacco free future for every child.



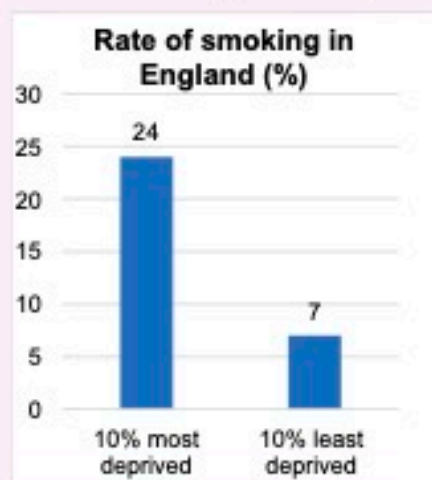
[#AllTogetherSmokefreeCM](#)

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# Smokefree Cheshire and Merseyside by 2030 – the context

- **2 in 3 smokers will die from their smoking, on average losing 10 years of life.** Smoking does far more than damage the heart and lungs. Smoking is a cause of 16 cancers, diabetes, dementia and accounts for two-thirds of the difference in life expectancy in people with a serious mental illness. **27% of cancer deaths and 86% of COPD caused by smoking**
- The average smoker spends around **£3000 a year** on smoking, more than an average energy bill.
- **A Smokefree Cheshire and Merseyside Strategic Framework and Plan is being co-produced system-wide building on local place plans to deliver a SF 2030.** Strategic leadership now in place through Sarah McNulty as Lead DPH and Ian Ashworth on behalf of ICB with strategic expert commissioned capacity from Andrea Crossfield, hosted with Champs until July
- **Early system momentum and engagement** with plans in place to progress financial investment and stakeholder engagement and Framework co-production now underway

**Core20:** Above-average smoking rates among the most deprived reduces their healthy life expectancy and increases pressure on the NHS



In England a third of all smokers live in the most deprived two deciles.<sup>1</sup> In NHS Cheshire and Merseyside ICB there are 237,000 smokers and 22% of people in routine and manual occupations smoke. Smoking costs your ICB £75.8M a year.<sup>2</sup>

Annually in your ICB smoking causes:

- 20,562 hospital admissions.<sup>3</sup>
- 3,435 premature deaths.<sup>4</sup>

Additional impact on communities in your ICB:

- 109,632 smoking households live in poverty.<sup>5</sup>
- 9,716 people out of work due to smoking.<sup>6</sup>
- 44,300 people receive informal care from friends and family because of smoking.<sup>7</sup>

**PLUS:** The most deprived groups have the highest smoking rates






National smoking rates among:

- People who are homeless (77%).<sup>8</sup>
- People entering prison (80%).<sup>9</sup>
- 11–16-year-olds with a mental disorder (22%).<sup>10</sup>
- People in social housing (26%).<sup>11</sup>

Smoking rates for those receiving addiction treatment in your ICB:

- Those receiving treatment for opioid addiction (74%).<sup>12</sup>
- Those receiving treatment for alcohol addiction (47%).<sup>13</sup>

**5: Five clinical areas of focus are all impacted by smoking**

				
<p><b>36. Maternity</b></p>	<p><b>37. Severe Mental Illness</b></p>	<p><b>38. Chronic respiratory illness</b></p>	<p><b>39. Early cancer diagnosis</b></p>	<p><b>40. Hypertension</b></p>
<p>Smoking is the leading modifiable risk factor for poor birth outcomes.</p> <p>In your ICB 10%<sup>14</sup> of women smoke at time of delivery, 2,256 women annually.<sup>15</sup></p>	<p>Smoking is the leading cause of the 10-20 year reduction in life expectancy for people with serious mental illness (SMI).</p> <p>In your ICB 45% of people with SMI smoke.<sup>16</sup></p>	<p>Around 86% of all chronic obstructive pulmonary disease (COPD) deaths are caused by smoking.</p> <p>In your ICB 1,258 people a year die from COPD.<sup>17</sup></p>	<p>Smoking is the leading preventable cause of cancer responsible for 27% of cancer deaths.</p> <p>In your ICB 1,547 people a year die from cancer caused by smoking.<sup>18</sup></p>	<p>Smoking cessation is embedded in <a href="#">NICE guidelines on hypertension</a> because smokers' CVD risk is double that of non-smokers. Nationally 9,300 people a year die from CVD caused by smoking.<sup>19</sup></p>
<p><a href="#">Find out more</a></p>	<p><a href="#">Find out more</a></p>	<p><a href="#">Find out more</a></p>	<p><a href="#">Find out more</a></p>	<p><a href="#">Find out more</a></p>

# Consensus around subregional delivery

**ASH 2022 report found nationally that there was agreement that the following functions worked well at regional/ supra-local level:**

- Action on illicit tobacco, both in tackling supply and demand
- Communications campaigns
- Advocacy - making the case for tobacco control
- Policy and intervention development
- Supporting local implementation.



# Building a momentum for a Smokefree Generation

- DsPH welcomed announcements for disposable vapes ban and for historic Tobacco and Vapes Bill to protect children while supporting adult smokers to swop to stop
- The Champs Collaborative has supported Smokefree Action Coalition (SFAC) Briefing to all Parliamentarians on the Bill. Advocacy plan in place working with SFAC partners including regular engagement with all MPs directly and through collective DsPH/Champs Collaborative communication and youth advocacy
- Marketing and Communications work including link to national NSD plans supported by local case studies
- Well-attended workshop to establish appetite for CM Framework and support joint working across sectors





# Champs Collaborative/LGA Sector Led Improvement event

**Event participants came together around an emergent vision to deliver an All Together Smokefree Vision for Cheshire and Merseyside.**

To support this the top three priorities agreed for the Smokefree Framework were:

- Advocacy to push through new legislation and policy
- Communications, insight, campaigns and consistent messaging
- Coordinating activity at a subregional level with expert capacity and governance structure

Support for the World Health Organisation Framework Convention on Tobacco Control MPOWER evidenced based model for action on tobacco



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# Proposed components of the strategic framework/plan

<b>MPOWER Components</b>	<b>All Together Smokefree Framework Actions – Ending Smoking. Everywhere. For Everyone.</b>
<b>Monitor tobacco use and prevention policies</b>	Support the achievement of national targets through committing to 2030 targets at CM and local place levels. Develop digital platform for data collection, analysis and monitoring (and engagement). Ensure programmes and projects are built on evidence and insight and build national leadership role for CM research, innovation and development partnerships.
<b>Protect people from tobacco smoke</b>	Expand smokefree policies and places, including through the Prevention Pledge. Work with housing partners to support smokefree homes and wider partners to support healthy streets, recreational space and places for children. Advocate for legislation promoting smokefree environments.
<b>Offer help to quit tobacco use</b>	Enhance access to quit support including integrating NHS Tobacco Dependency support with community quit support. Develop standardised universal offers, including 24/7 digital stop smoking offers, with targeted support for priority populations. Promote awareness of available support.
<b>Warn about the dangers of tobacco</b>	Implement multimedia campaigns at scale embedding at system and local level. Target messaging to priority populations. Amplify national campaigns. Deliver a programme of proactive PR. Deliver resources and communications approaches to prevent uptake of children and young people smoking and vaping supported through locality community, schools and youth programmes.  Advocate through the Smokefree Action Coalition for pack inserts and warnings on individual cigarettes.
<b>Enforce tobacco regulation</b>	Collaborate with regulatory agencies to enforce high levels of compliance with existing tobacco <i>and vaping</i> regulation. Work with Smokefree Action Coalition partners to advocate for stronger tobacco and vape regulation including through the current Tobacco and Vapes Bill and the DEFRA ban on disposable vapes. Continue to advocate for a levy on the Tobacco Industry to fund tobacco control activity .
<b>Raise taxes on tobacco</b>	Advocate for continued tobacco tax escalator. Implement a comprehensive illicit tobacco programme to maintain the price driver.



# Accelerating a Smokefree Generation through a Smokefree Cheshire and Merseyside Framework

**Ian Ashworth**

Director of Population Health  
NHS Cheshire and Merseyside

**Dr Sarah McNulty**

Director of Public Health for Knowsley  
Lead Director of Public Health for  
Smokefree Cheshire and Merseyside

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# Accelerating Quitting: Supporting more people to make more effective quit attempts, more often

**Dr Sarah Jackson**

Principal Research Fellow

Behavioural Science and Health Institute of Epidemiology & Health,  
University College London

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# Watch online

[https://youtu.be/YIPbl5sHEzA?si=2o9IPX9yGkOukT6\\_](https://youtu.be/YIPbl5sHEzA?si=2o9IPX9yGkOukT6_)



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# Learning from Fresh, the longest running English regional programme

**Ailsa Rutter OBE**

Director

Fresh and Balance

#AllTogetherSmokefreeCM

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*The Fresh programme: an overview to the NE  
approach*

CHAMPs meeting 23<sup>rd</sup> April 2024

Ailsa Rutter OBE FKC HonMFPH

Director of Fresh and Balance



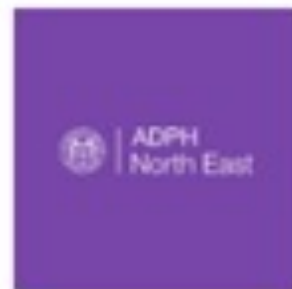
# What I will cover

Rationale

Approach- from 2005 to 2023

Advocacy and campaigns at the heart

The importance of the Ps



Office for Health  
Improvement  
& Disparities




# Approach taken

- Evidence base 1962 – RCP
- International to local level
- Population level working – as opposed to simply targeting individuals – recognition around role of industry
- Shifting societal norms- importance of making tobacco use/industry less attractive, affordable, accessible
- **Partnership and collaboration key**
- **Clear vision along the way**
- **Distributed leadership**



**NO one  
magic  
solution**

**Some things  
you need to  
keep doing-  
they work**



**The principles of our approach have stood  
the test of time**

# Learning from the experts



# “Countermeasures”

One in every two smokers will die from a smoking related illness.

How will your family cope if you're the one?



It's never too late for you to quit smoking. Ask here for help and advice.



For your kids' sake, never smoke indoors. Take it right outside.



Harmful second-hand smoke contains poisons like carbon monoxide, cyanide and benzene – and lingers for up to 5 hours, waiting for your child to breathe it in. For tips on going smoke-free visit [smokefreefamilies.co.uk](http://smokefreefamilies.co.uk)



“I knew smoking caused lung cancer. I never thought it would give me throat cancer aged 52.”

Smoking causes 16 different cancers. Quitting is a clear way to reduce your risk.

Ask here for help and advice.

Support by **GENES RESEARCH**

**fresh** quit smoking

Tony Chibarro, Middlesbrough

**NHS**

“Don't give up on yourself. It's never too late to stop smoking.”

Dr. Ruth Sharrock – Respiratory Consultant

Protect yourself and your family – your health starts to improve from the moment you stop.

For help and advice to quit **Search Smokefree** or call **0300 123 1044** (Lines open Mon-Fri 9am-8pm, Sat-Sun 11am-4pm)

**fresh** quit smoking

**ILLEGAL TOBACCO. IN YOUR NEIGHBOURHOOD. AND GETTING KIDS HOOKED ON SMOKING.**

Illegal tobacco dealers help children in your area to get hooked.

**QUICK. EASY. COMPLETELY ANONYMOUS.** If you have any information about illegal tobacco sales in your area, share it with us anonymously.

CALL: **0300 999 0000**  
VISIT: **keep-it-out.co.uk**

**ILLEGAL TOBACCO KEEP IT OUT.**



**COPD IS A DISEASE WHERE YOUR LUNGS ARE DESTROYED.**

**BREATHLESSNESS IS AN EARLY SIGN.**

EVERY CIGARETTE IS DOING YOU DAMAGE

**NHS**

Two days before my 50th birthday, they found a tumour on my lung

Put smoking behind you Find support at [freshquit.co.uk](http://freshquit.co.uk)

**fresh** quit smoking

Cathy Hunt, Durham



# “Cornerstones”

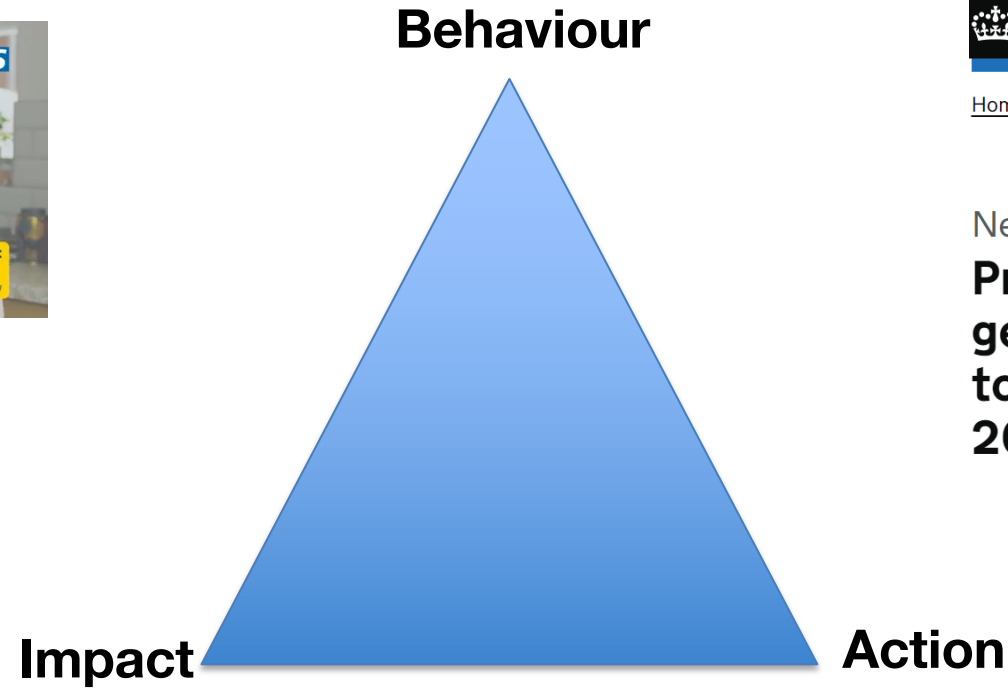
- Campaigns and media are cornerstones of our programme – creating awareness and shaping/reversing social norms
- It’s not just about getting individuals to change what they’re doing - strong evidence of campaigns as “system level interventions” – they not only lead to individual actions but shape attitudes, social norms, professional practice and can inform local, regional and national policy
- We seek and apply audience insight about existing knowledge, barriers and opportunities and “what works” – raising awareness of the risks and providing real advice and support
- News, PR and social – keeping issues in the media & public eye all year round – F&B “go-to” points on tobacco and alcohol issues for regional and national news media
- Reflecting the story of people in North East communities



# Aims



£2.5 BILLION a year up in smoke – cost of smoking in the North East revealed



GOV.UK

Home > Health and social care

News story

**Prime Minister to create 'smokefree generation' by ending cigarette sales to those born on or after 1 January 2009**

- **Behaviour** change: encourage people to quit smoking and reduce alcohol consumption
- Highlight **impact** of tobacco on our region, businesses, families, communities, LAs, economy....
- Calling for **action** on the solutions with the greatest impact



**Sue Mountain – now the face of the national DHSC quit smoking campaign**



# Advocacy on evidence based action

- **Set clear objectives**
- **Clear ask** e.g. supporting the Tobacco and Vapes Bill
- **Work collaboratively- leadership of ASH leading the SFAC** e.g. responding to consultations
- **Frame the debate** e.g. increasingly around economy- use your ready reckoner figures
- **Build the evidence and the case for** e.g. costs to health, social care, economy
- **Develop political champions-** e.g. role of APPG on Smoking or Health and Fresh role with this – NE MPs
- **Show them the votes** e.g. annual YouGov survey led by ASH
- **Power of real people** – their voices are crucial
- **Find the lever**

# Multiple messengers

## Millions more will die without more action': North East health leaders urge minister to urgently clarify Stop Smoking plans

Public health bosses in our region are concerned by suggestions the Government could ditch a key anti-smoking plan

By **Sarah Valler** Health Reporter  
06.11.2023

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RECOMMENDED

Woman slammed for Golf into police car causing £15,000 damage

Woman falls from moving vehicle on the A1 in early hours incident

**fresh** Fresh - Making Smoking History @FreshSmokeFree · 4h  
Health campaigners have welcomed support for a #SmokefreeGeneration after first vote in Parliament. Smoking is not a choice but an addiction. Hear from retired tobacco retailer John McClurey who would rather have sold birthday cards than sympathy cards. @AshOrgUK @CR\_UK



1 2 5 31

Show this thread



**“**

**It makes no sense that the tobacco industry, which makes billions from a product that kills two in three users, isn't made to pay for prevention.**

**”**

**Dr Ruth Sharrock THE HARM STOPS HERE**

**fresh\***  
Making Smoking History

**fresh** Fresh - Making Smoking History @FreshSmokeFree · Apr 16  
Thank you for having our Director Ailsa Rutter on this am with @NickyAACampbell to talk about the very strong case for #smokefreegeneration policy and this once in a lifetime opp for MPs to vote to end the single biggest cause of cancer for future generations.

**BBC** BBC Radio 5 Live @bbc5live · Apr 16  
MPs are debating banning the sale of cigarettes to everyone born after 1 Jan 2009.

The government says it'll save thousands of lives.

...  
Show more

**BBC** RADIO 5 LIVE

Nicky Campbell asks...  
**SMOKING: DO YOU BACK THE BAN?**

Listen on **SOUNDS**

1 3 3 544



NHS chief Samantha Allen and North East Chamber of Commerce boss John McCabe are among those calling for more to be done on tobacco control (Image: NHS / North East England Chamber of Commerce / PA)



Jacob Rees-Mogg ARGUES over govt's 'muddled approach' to...  
6.1K views · 18 hours ago





# Reflections- the importance of the Ps

Price, Promotion, Packaging, Place, Product

**Purpose**

**Proportionality**

**Partnership**

**Principles**

**Politics**

**Persistence**

**Passion**

**People**



**Nearly 8 million lives**



**have been lost to tobacco since 1971**



**26% of all deaths in last 50 years due to the cigarette**



# Learning from Fresh, the longest running English regional programme

**Ailsa Rutter OBE**

Director

Fresh and Balance

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# Opportunities to deliver a Smokefree 2030 through a subregional programme

**Deborah Arnott**

Chief Executive

Action on Smoking and Health

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# Opportunities to deliver a Smokefree 2030 through a subregional programme

**23<sup>rd</sup> April 2024**

**Deborah Arnott**

**Chief Executive**

Action on Smoking and Health (UK)

ASH receives funding from:



CANCER  
RESEARCH  
UK



**ash.**  
action on smoking and health

# Generational end to smoking

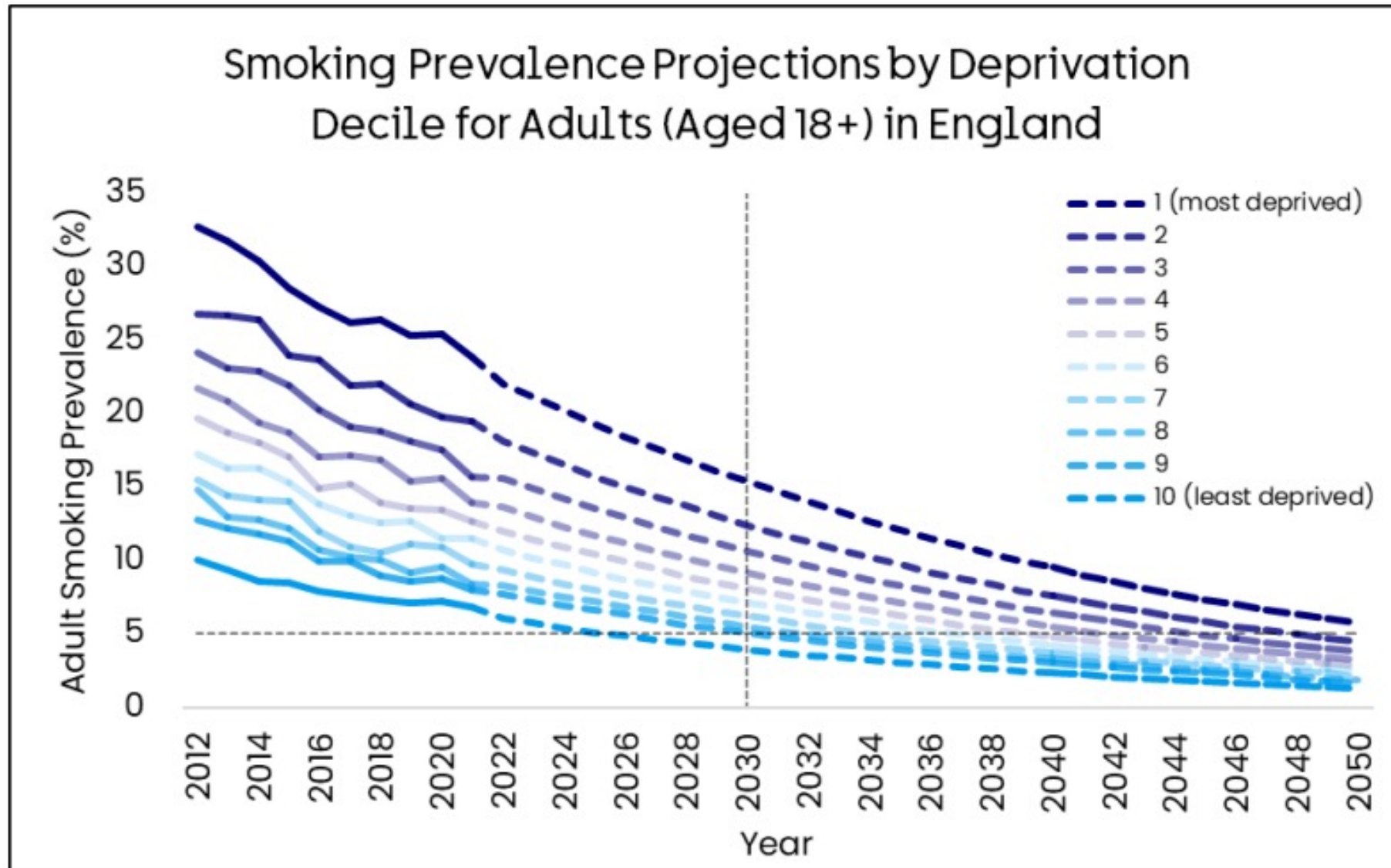
- Tobacco and Vapes Bill will phase out smoking
- But without further action this will be slow and key populations will be left behind

A subregional programme can drive change at pace for all populations





# Progress towards a smokefree 2030



- Least deprived hit 5% ~2025.
- Most deprived hit 5% **25 years later**

# Challenge: not enough people try to quit and too few use effective quitting aids

Currently:

- ~ 37% make a quit attempt each year

To speed progress:

- Increase in quit attempts to at least 45% - **higher for most disadvantaged**

Currently

- ~26% of those who try succeed

To speed progress:

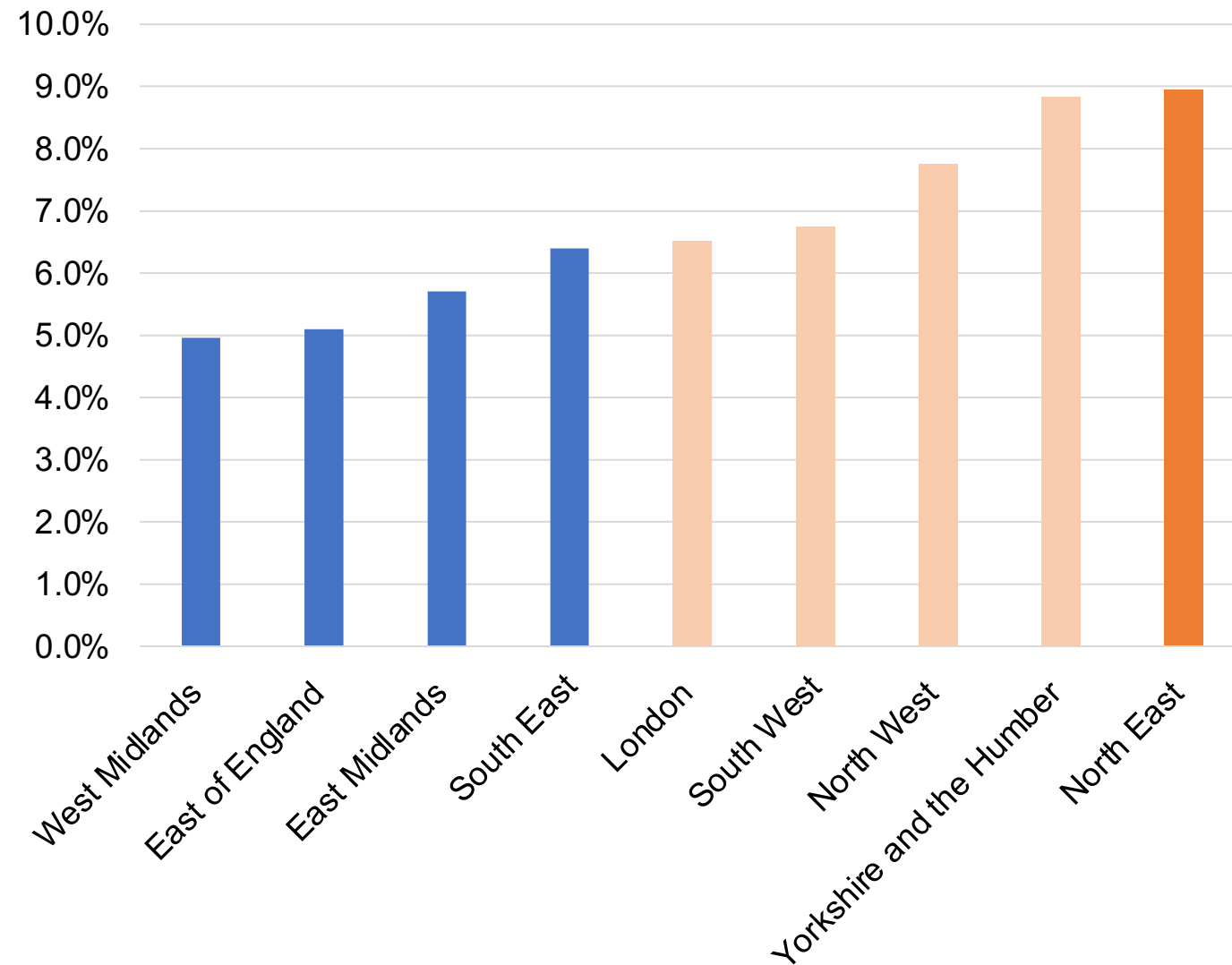
- Increase quit success to ~30% - **particularly for the most disadvantaged**

# How to increase quitting

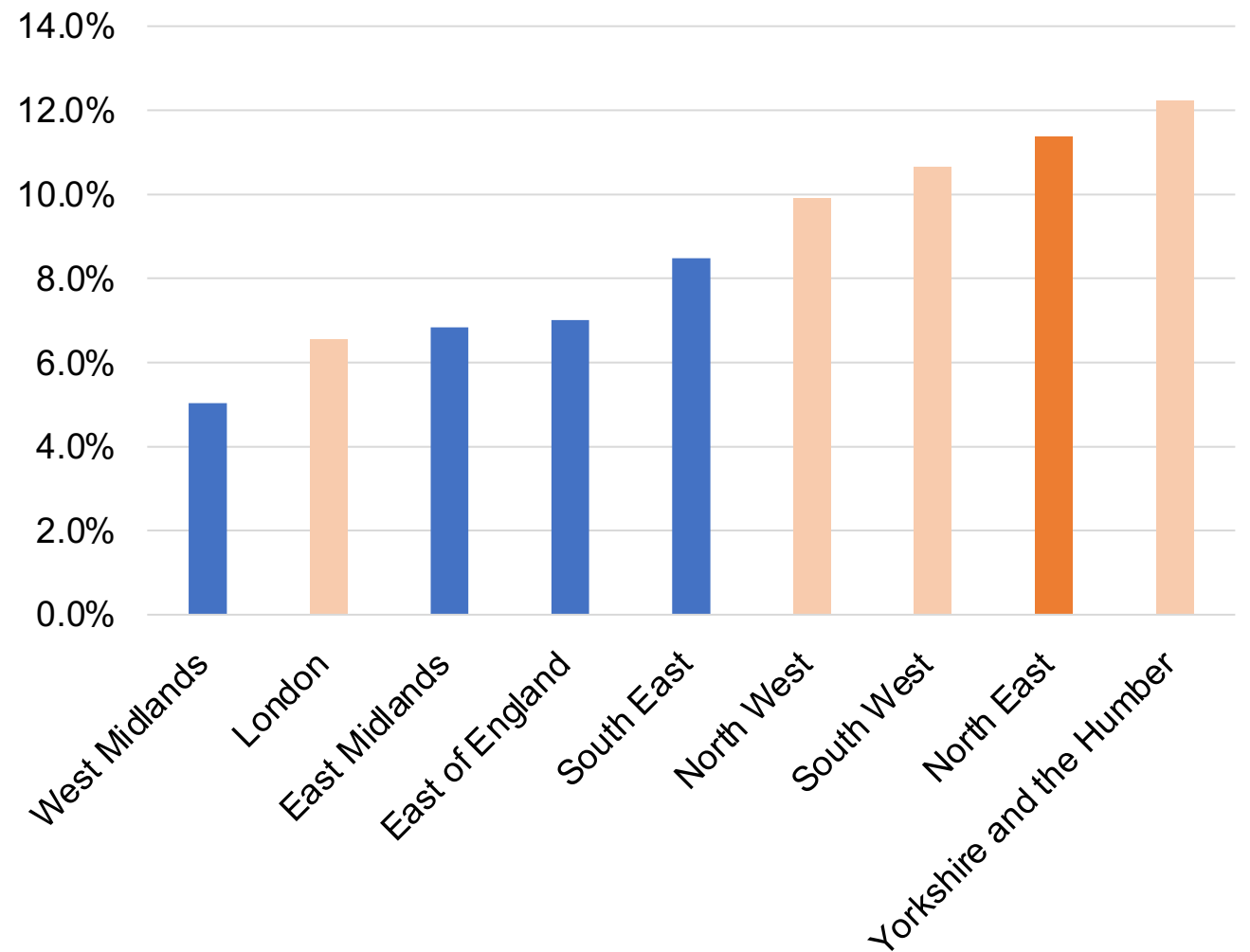
Area of activity	How it will impact on smoking rates			
	Improve quit success	Increase quit attempts	Prevent relapse	Prevent uptake
Invest in quit support	✓		✓	
Increase access to evidence-based aids	✓		✓	
Communications strategy	✓	✓	✓	✓
Enforce regulations		✓	✓	✓
Expand Very Brief Advice (VBA)		✓		
De-normalise smoking		✓	✓	✓
Advocating for national policy	✓	✓	✓	✓

# Smoking rates have fallen fastest in areas with regional programs

Declines in smoking rates 2012-2022 by region



Declines in smoking rates 2012-2022 among R&M populations by region



# Why do system-wide programmes bring benefits?

- Economies of scale
- Amplify local activity through co-ordination
- Provide hub of expertise
- Take a targeted approach to disadvantaged populations
- Collectivise risk

# The purpose of sub-regional model

## Co-ordination across region

- Supported network across NHS, Local Authority (LA) public health, LA other functions, police, fire, HMRC etc.
- Shared priorities
- Action at place co-ordinated and amplified across system

## Effective delivery

- Agreed set of functions to be delivered across region
- Functions will deliver economies of scale
- Amplification locally but not replicated

## Inspire change

- Give leaders a voice to champion action across system
- Champion action needed nationally
- Empower local communities through engagement with smokers

# No time to waste

- The **smokefree generation** legislation, funding nationally, locally and in NHS = major opportunity to accelerate change
- Sub-regional **collaboration** can maximise that opportunity in important ways.
- Show **leadership** now: Join the Smokefree Action Coalition, communicate Cheshire and Merseyside's commitment to change





# Opportunities to deliver a Smokefree 2030 through a subregional programme

**Deborah Arnott**

Chief Executive

Action on Smoking and Health

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# Break

Q&A with the speakers after the break

Please sign our pledge board!

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# Q&A with speakers

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# Table discussions

Reflecting on the high-level Framework:

1. Do you endorse its components?
2. Which is the most important element?
3. Are there any additional opportunities?

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# Feedback from table discussions

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# Describing our ambition – your words

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# All Together Smokefree

**End smoking. Everywhere. For everyone.**

**How would you describe our ambition? How does it make you feel?**

**[www.menti.com](http://www.menti.com)**

**Code: 6533 2470**



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# Reflections and closing remarks on next steps

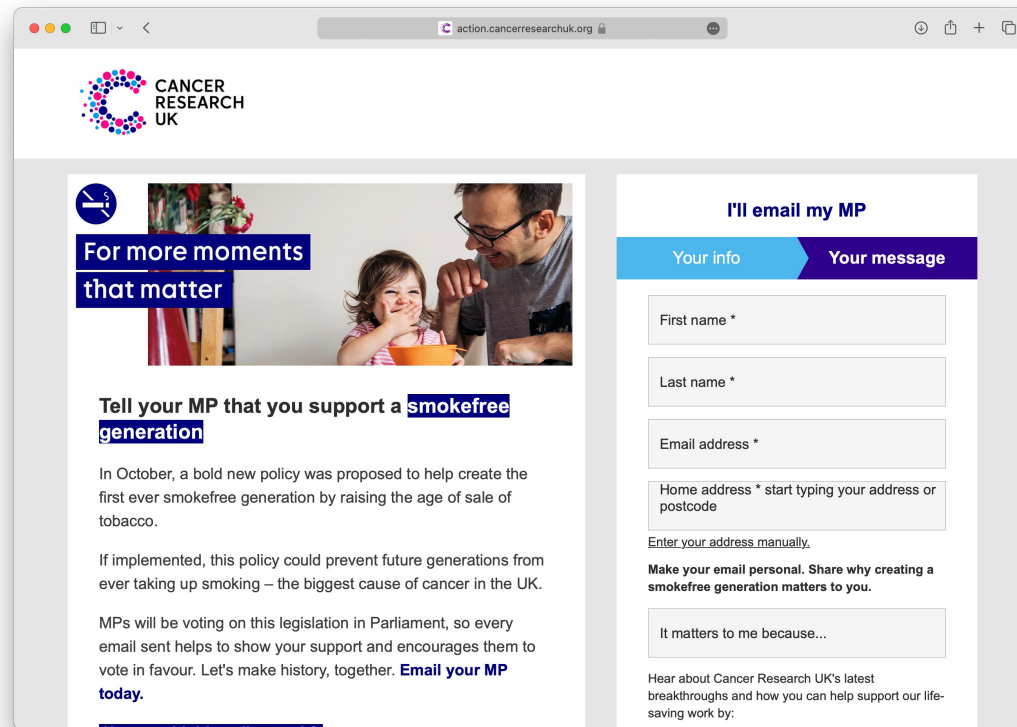
**Raj Jain**  
Chair  
NHS Cheshire and Merseyside

**Dr Ruth Hussey CB, OBE, DL**  
Non-Executive Member  
NHS Cheshire and Merseyside  
Integrated Care Board

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# Tell your MP that you support a smokefree generation



The screenshot shows a web browser window with the URL [action.cancerresearchuk.org](http://action.cancerresearchuk.org). The page features the Cancer Research UK logo and a navigation menu. The main content area is titled "I'll email my MP" and is divided into two sections: "Your info" and "Your message". The "Your info" section contains four input fields: "First name \*", "Last name \*", "Email address \*", and "Home address \* start typing your address or postcode". Below the home address field is a link that says "Enter your address manually.". The "Your message" section contains a text area with the placeholder "It matters to me because...". At the bottom of the form, there is a small text block that reads: "Hear about Cancer Research UK's latest breakthroughs and how you can help support our life-saving work by:".

Scan the QR code to contact your MP

