

## Information briefing

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**Report To:** Cllr Rob Pocock  
Cabinet Member - Health & Social Care

**Date:** 1<sup>st</sup> February 2024

**Title:** Proposals for spend of Smokefree Generation Section 31 Grant and Swap to Stop grant 2024/25 from Department for Health and Social Care (DHSC)

**Purpose:** To provide a briefing on outline proposals for spend of the additional £1,676,048 funding confirmed in November for smoking cessation and to highlight existing services, gaps and solutions for what this new money could be spent on.

### **BACKGROUND**

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An additional £1,676,048 funding will be provided to Birmingham City Council by the DHSC through a new Smokefree Generation Section 31 grant for 2024/25. This will be on top of the current smoking cessation public health grant allocation within the Council which is £1,453,986 in 2023/24. This additional grant funding is ring-fenced to smoking cessation and cannot be used for illicit tobacco as there is £30 million allocated to this centrally.

A condition of this grant is that local authorities must maintain their existing spend on stop smoking services and maintain compliance with the reporting requirements for expenditure related to the stop smoking service by submitting quarterly reports to NHS Digital.

Payments will be given to local authorities every 6 months. In the first 6 months, local authorities will receive 70% of their allocated financial year's funding. They will then be expected to provide grant reporting to the DHSC grants team to receive the second payment. Local authorities will receive the grant agreement in January 2024. This will provide local authorities with the full grant conditions. Once received, local authorities will be asked to read and return a signed copy. **The grant agreement will start from 6 April 2024.**

Grant allocations will initially apply for the first year of the grant (the financial year 2024 to 2025). Specific allocations for 2025 to 2026 and beyond are not confirmed at this stage, the Government has already confirmed additional funding of £70 million a year for 5 years, from 2024 to 2025 through to 2028 to 2029. Allocations will continue to be based on the average smoking prevalence over a 3-year period to ensure the allocations are based on the most robust and recent data but is not expected to vary beyond 5-10%.

Starting from the second payment, local authorities will need to complete a statement of grant usage to the DHSC grants team, before they receive the next payment. The statement of grant usage will ask local authorities to provide the funding amount they received, their actual eligible spending, and

a reason for any differences. It is not known yet whether any unspent money can be carried forward to the next financial year, but this will be set out in grant conditions.

The key success indicators for this funding are:

- number of recorded quit dates set per 100,000 smokers.
- percentage of people engaging with services who successfully quit smoking (recorded quit rate)
- number of recorded quits per 100,000 smokers.

The funding formula is based on a fixed sum per smoker based on average 3-year smoking prevalence, as show in the image below:

Local authority	Average 3-year smoking prevalence (2020- 2022)	Estimated number of smokers (2021 populations)	Current budget (2023-2024)	Confirmed additional allocation
Birmingham	16.43%	140, 652	£1,453,986	£1,676,048

#### **CURRENT SMOKING CESSATION SERVICE OFFER:**

The new Birmingham Stop Smoking community service commenced on 1st October 2023 and is currently delivered by 106 providers across 122 sites (69 GP Practices, 1 business and 52 Pharmacies), in addition the community service is supplemented by a digital App (Quit with Bella). The contract for the community service is for 4 years with a break clause at the 2-year mark while the contract for Quit with Bella is for 2 years and ends May 2025.

Stopping smoking improves an individual's health status and enhances their quality of life, reduces the risk of premature death, and can add as much as 10 years to life expectancy. It also reduces the risk for many adverse health effects, including poor reproductive health outcomes, cardiovascular diseases, chronic obstructive pulmonary disease (COPD), and cancer.

Payments are made based upon successful 4 & 12 week quits, target population quits including pregnant women, young people, routine, and manual workers. The price paid to GPs/Pharmacies per quit is below:

Tariff payments:				
	General population		Target population	
	4 weeks	12 weeks	4 weeks	12 weeks
<b>Payment amount</b>	£80	£120	£160	£240

Please note that 12-week payment is only made if the patient quit at 12 weeks and the amount is cumulative i.e. If a service user that is part of the general population quits at both the 4- and 12-week mark, Providers will be paid £80 for the 4 weeks and then an additional £40 if they have also quit at 12 weeks.

The Quit with Bella contract for 24 months is £115,000 (excluding VAT).

There are also licenses and support for clinical systems which collect the data for the services:

- GP clinical system £47,782.00 (shared with NHS Health Checks, excluding VAT for 4 years, ends May 2027)
- Pharmacy clinical system £67,711.00 (excluding VAT for 4 years, ends May 2027)
- Training support for service providers £3,950.00 (excluding VAT for 1 year, ends May 2024)

The new Birmingham Stop Smoking community service commenced on 1st October 2023. Follow up analysis has been undertaken to determine if and where there is a risk of health inequalities being exacerbated due to any changes in geographical access, areas of deprivation or population demographic. The community services were procured via a Flexible Contracting Agreement (FCA) in Summer 2023. The FCA allows the council to reopen the tendering process at any time and it was opened again in November 2023 and closed on 3rd January 2024 to increase the number of providers offering this service. As a result, there were 40 submissions in total (23 GP Practices and 17 Pharmacies), covering 45 sites. Initial analysis shown in Appendix 3 recognises that there are still gaps geographically in provision of these services and we hope to identify these areas and will target pharmacies and GP practices in these localities to engage in recruitment before the FCA opens again later this year, subject to approvals. In addition, we are exploring potential postal NRT offer to support the Local Maternity service, currently awaiting outcome from Birmingham and Women’s and Children own internal cost analysis, their alternative is to source, stock and supply their own NRT.

Quit figures for April 2022- March 2023 (Community service and “Quit with Bella” App):

- Total 4 week quits for 2022-23= 3,391
- Total 12 week quits for 2022-23= 1,573

The number of successful 4 week quits delivered in 2022/23 was approx. 10% higher when compared to 2021/22. The number of successful 12 week quits delivered in 2022/23 was almost the same figure when compared to 2021/22.

Table 1. Quit performance data for 2022/23 is detailed in the table below:

	Quarter 1 22/23		Quarter 2 22/23		Quarter 3 22/23		Quarter 4 22/23	
	4 WEEKS	12 WEEKS	4 WEEKS	12 WEEKS	4 WEEKS	12 WEEKS	4 WEEKS	12 WEEKS
<b>Pharmacies</b>	302	305	296	254	301	266	360	292
<b>GPs</b>	63	34	40	24	23	13	41	5
<b>QwB App</b>	444	121	461	151	532	51	538	57
<b>Total</b>	809	460	797	429	856	330	929	354

Most recent data published on Public Health England Fingertips shows that in 2022, 13.6% of the adult population in Birmingham were recorded as smokers. This has dropped from approx. 16.1% in 2021 and is in line with an overall national decline in prevalence. However, smoking is still the leading cause of ill health, disability and death in England and it responsible for one in four UK cancer deaths. It is a primary cause of lung cancer, heart disease, stroke, heart failure and dementia.

## **BCC ACTIONS ALREADY UNDERWAY**

### **Previous briefing on Government policy**

In April the Public Health Minister (Neil O’Brien MP) issued a press release on ‘Achieving Smokefree 2030: Cutting Smoking and Stopping Kids Vaping’. A Cabinet Member Briefing was shared in April to summarise the main implications for Birmingham from the Government announcement.



CMB - Achieving  
Smokefree 2030 Next

Key points relevant for Birmingham’s smoking cessation offer includes:

- Application to the Swap to Stop national pathfinder scheme for provision of vapes alongside local smoking support to stop services.
- National incentive scheme for pregnant women who smoke.

- Increase stop smoking support for NHS mental health services.

### **Previous briefing on DHSC Case for change- Stopping the start: our new plan to create a smokefree generation.**

To summarise the Government's intentions and review the implications for Birmingham and Solihull's Tobacco Control Alliance and smoking cessation services.



Briefing%20Note%20  
smokefree%20genera

### **Tobacco Control Alliance**

The Birmingham and Solihull Tobacco Alliance brings together partners involved in all aspects of tobacco availability and use across the BSol ICS footprint and has been meeting since the summer of 2022. The Alliance has Terms of Reference and has used an assessment tool to identify gaps and recommendations in our approach to Tobacco Control.



BSOL TCA ToR - v3 - BSol%20Clear%20A Smoking%20Prevalence%20-%20Ward%20Assessment%20Summary Final with signatures

### **PROGRESS TO DATE:**

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The framework for the DHSC grant funding focuses on:

1. Strengthening capacity and enhancing infrastructure for smoking cessation
2. Building demand for smoking cessation services.

Mapping and appraisal of identified gaps within existing Birmingham stop smoking services highlights:

- Need for increase in numbers of dedicated specialist staff to provide advanced smoking cessation interventions.
- Training non-specialist staff (e.g., social workers) in Very Brief Advice
- Enhanced training offer for all smoking cessation advisers
- Increase access to smoking cessation in places like mental health services or workplaces.
- Partnership working with the drug and alcohol services, job centres, charities, workplaces, or other settings to identify smokers and make active referrals.
- Developing local communication and marketing campaigns
- Need to increase public health specialist staffing capacity to develop, implement and monitor this enhanced smoking cessation offer during the three-year period of the grant.

Please see Appendix 5 for diagram which aims to demonstrate how the current and prospective future services work together.

### **NEXT STEPS FOR BCC**

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**The next steps will be to develop a more detailed plan of how to utilise this additional funding based on existing services and the mapping and appraisal of gaps in service provision. This will include:**

- **Provision of additional services**

### **National 'Swap to Stop' Scheme:**

It is proposed that Birmingham City Council puts forward an expression of interest (EOI) for the pathfinder programme to expand the existing vape offer in the community and an additional EOI in the subsequent bidding round once further development work has been undertaken to put in place behavioural support services for specific at-risk communities including clients with substance misuse issues. The deadline for submissions are end of January and late February 2024.

A world-first initiative, the national 'Swap to Stop' scheme, will offer a million smokers a free vaping starter kit with an investment of up to £45 million over 2 years. Smokers who join the scheme must commit to quitting smoking with expert support from local stop smoking services. The program will target high-risk communities, including job centres, homeless centres, and social housing providers. This scheme capitalizes on the effectiveness of vaping as a tool for quitting smoking, with promising results from existing pilots. Swap to Stop is a scheme that provides a supply chain of vape starter packs (2-4weeks supply) only. The scheme does not include funding for local authority stop smoking service provision or training. Expressions of interest criteria includes a requirement that the provision of behavioural support and tracking/reporting the quit via the main reporting route is available. BCC would need to establish these pathways jointly with other services. The PH Team working with the BSoI Tobacco Control Alliance will consider the proposals set out in the DHSC's recently published Case for Change – Stopping the Start: our new plan to create a smokefree generation and consider how to enhance free access to vape starter kits and behavioral change support for vulnerable high-risk groups.

### **Advanced stop smoking service/ intervention:**

To develop an advanced stop smoking service that offers targeted support that specialises in direct referrals from secondary care i.e., NHS screening, Targeted Lung Health check programme, dietetic team. These groups often require additional support alongside other health interventions. More robust formal triage and would form a separate service offer. This need for service is based off feedback from LTP Tobacco Treatment Pathways, LMNS Pregnancy Pathway and Dietetics Team.

### **Smokeless Tobacco:**

We are currently exploring and developing a communication/marketing intervention to raise awareness of health risks of Paan use within the Birmingham Bangladeshi community. Paan use is linked to oral health/dental problems, cancer, and other conditions. Therefore, to support our Bangladeshi community, we want to create messages that explain the risks and encourage people to reduce, and ideally stop using Paan.

### **Vaping:**

There will be some flexibility at a local level for the funding to support wider tobacco control policies and efforts to reduce youth vaping, such as for local awareness-raising campaigns. However, most of the funding will be focused on stop smoking services and support. Due to the recent increase in vaping among secondary school aged children, and the negative health and environmental impacts of vaping, a whole host of resources have been produced by OHID for teachers to use to educate their pupils about vaping. We would want to carry out evaluation of how these tools are being used and assess support needs regarding vaping through engaging with BEP (Birmingham Education Partnership).

- **Enhancement of current services**

### **Communications and Marketing:**

Capacity could also be commissioned for targeted engagement, particularly focused on Birmingham's diverse communities. We would want to focus on increasing awareness of the current and future services not just with those who may want to access the services but health care professionals and other relevant stakeholders such as Adult Social Care and Community Health. It is proposed we

consider this as a Gold comms campaign in 2024/25. This work would seek to amplify national communication and marketing campaigns.

### **Training and resources:**

To provide further Making Every Contact Count (motivational interviewing) training and nationally accredited stop to support training for frontline workers to increase motivation to quit and support access to services.

CO monitoring previously supplied and paid for by the council from 2019-2021. CO monitoring is evidence-based and recommended by the National Institute for Health and Care Excellence (NICE). It is an effective tool for reinforcing motivation during quit attempts as well as validating outcomes, and it is also routinely used by healthcare professionals to identify smokers as part of referral pathways into support to quit. In addition, physical resources such as roller banners, posters, stress balls and tar jars this could form part of the communications and marketing commission.

Consider additional funding for NRT and other pharmaceutical therapies to support smoking cessation services as a result of increased numbers of quitters.

### **Local system development:**

The serious mental illness physical health transformation workstream has identified smoking cessation as a key priority. Work has begun to map smoking prevalence in primary and secondary mental health care. Proposals to enhance access to community stop smoking support for these populations will form part of the planned expenditure of the grant.

The targeted lung health check (TLHC) programme evaluation has highlighted a gap in integrated pathways between screening and smoking cessation support. The team are developing a model of aligned interventions based on best practice programs being delivered elsewhere in the UK. The costs of specialist smoking advisor support for the TLHC are being costed for consideration as part of the PH grant allocation.

### **Strengthening specialist smoking cessation programme staffing capacity:**

To consider appointment of an additional G5 Senior Programme Officer (smoking cessation) on a fixed term contract to support the Public Health Adults Team to plan and deliver this five-year programme of work.

To consider an additional smoking cessation support worker to strengthen the smoking cessation offer through workplaces.

### **Evaluation:**

We need to allocate a proportion of the grant to undertake an evaluation of the impact of proposed changes because of increased funding.

## **RECOMMENDATIONS**

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It is recommended that:

- 1) Work continues to develop these proposals in preparation for submission Year One grant agreement of our when we receive it from DHSC later in January develop our medium- and long-term goals:

- Medium term – addressing system gaps. This will include commissioning targeted interventions for 2024 25 to engage populations with the highest prevalence as well as a specialist, community smoking support offer to align with MH & LD pathways, the Targeted Lung health check programme as well as preoperative support.
  - Long term - strengthen the current smoking support offer by modelling services for the next 2-3 years to align with and create an integrated Healthy lifestyle offer. These services will lay the foundation for any future healthy lifestyle services.
- 2)** We submit expressions of interest for the Swap to Stop scheme in Round 2 and 3 to support our existing vape offer and support service enhancements for people with substance misuse problems.

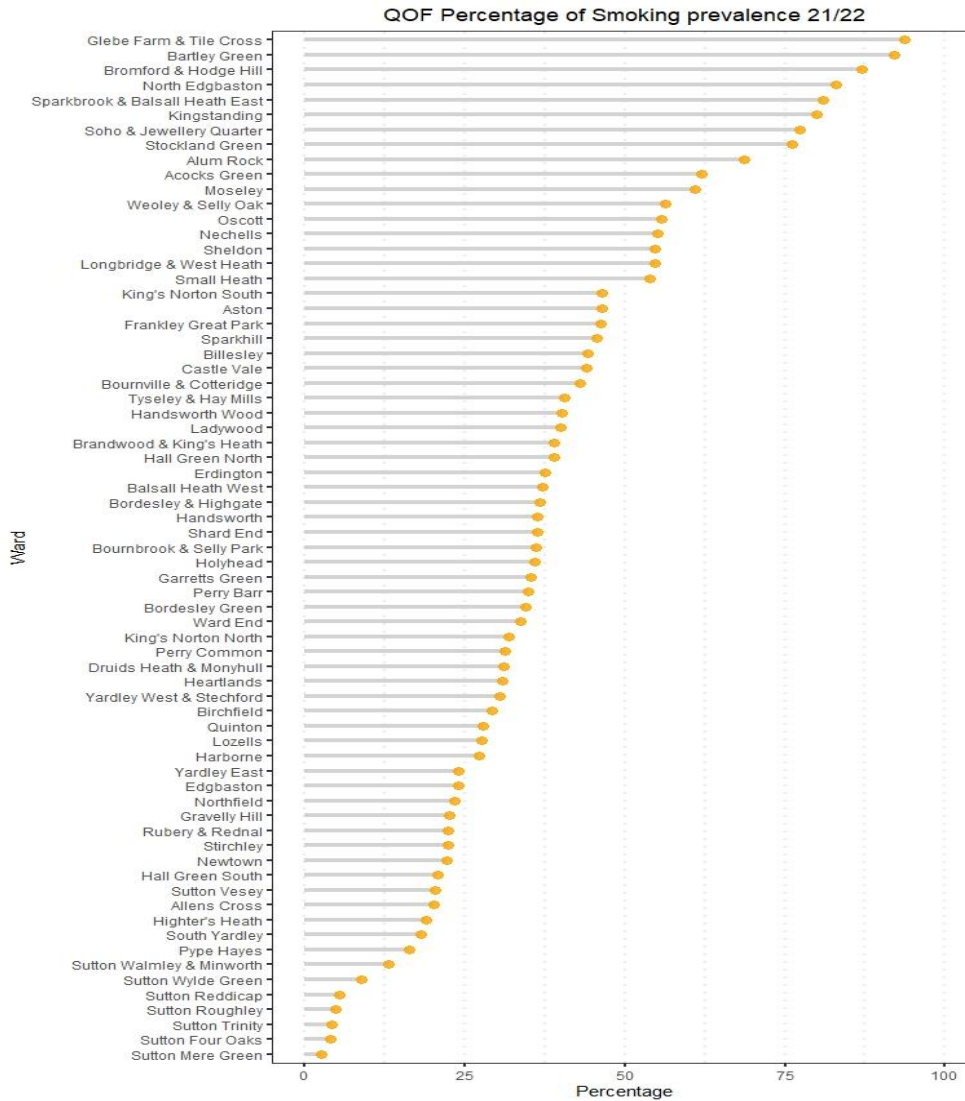




## Appendix 2 – QOF Percentage of smoking prevalence 2021-22

Appendix 2: QOF Percentage of Smoking Prevalence 2021-22.

Appendix 2 shows the considerable variation in recorded smoking prevalence in GP records for adults in Birmingham’s Wards. Future interventions to reduce smoking prevalence need to respond to the variation between Wards, and target communities and populations appropriately.



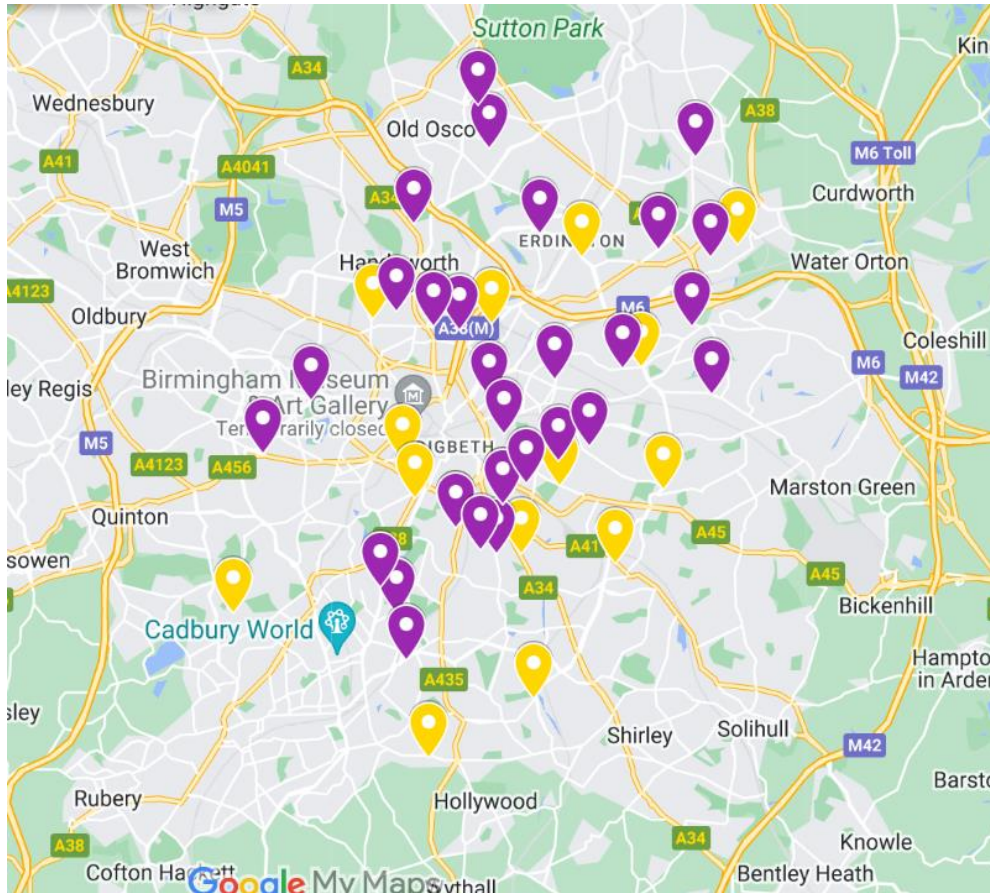
### Appendix 3 – Mapping of current stop smoking providers from 1<sup>st</sup> October 2023



Appendix 3: Map to show geographical location of current stop smoking providers.

Appendix 3 Blue points shows the GP Practices which have signed up to deliver the stop smoking service, red points show the pharmacies that have signed up to deliver the stop smoking service.

## Appendix 4 – Mapping of additional prospective stop smoking providers from 1<sup>st</sup> April 2024



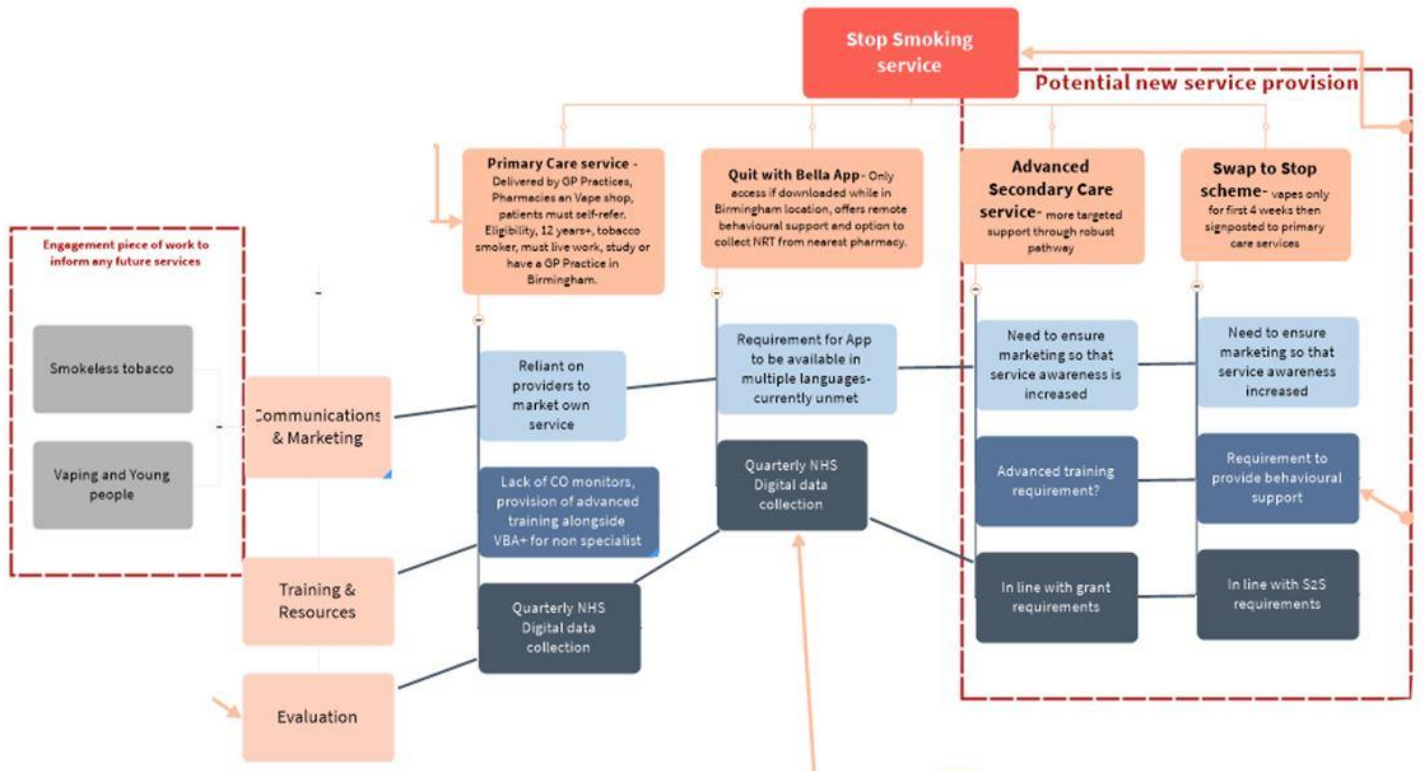
Appendix 4: Map to show geographical location of prospective future stop smoking providers.

Appendix 4 Purple points shows the GP Practices which applied to deliver the stop smoking service commencing 1<sup>st</sup> April 2024, yellow points show the pharmacies that have applied to deliver the stop smoking service commencing 1<sup>st</sup> April 2024.

There are still geographical gaps in provision in:

- Bartley Green
- Selly Oak
- Bournville
- Kings Norton
- Northfield
- Rubery

## Appendix 5- Flow chart of current and prospective future services





# Appendix 6- ASH Ready Reckoner Autumn 2023



## ASH Ready Reckoner Autumn 2023

**Region**

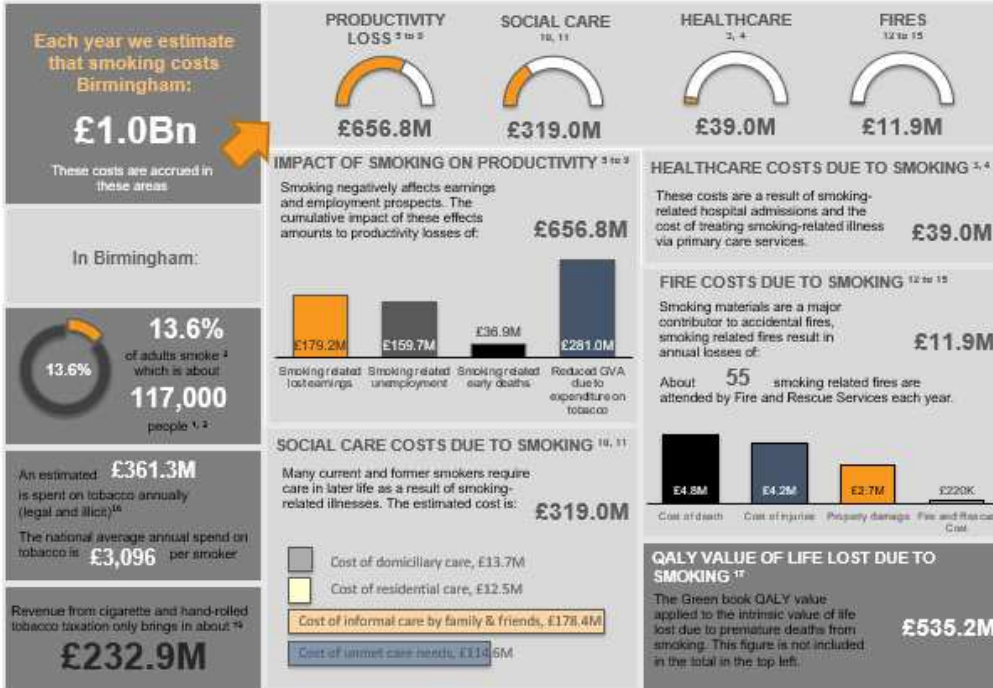
**Local Area**

**Ward**

**Constituency**

**Combined Authority**

This displays the high level cost of smoking to society by various geographies



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