

The Public Health Call to Action for Tobacco - Northamptonshire

Smoking Prevalence



15.9% of adults are current smokers*



20.6% of adults in routine and manual occupations are current smokers, 2017



14% of secondary school pupils tried a cigarette in 2017*



3% of secondary school pupils smoked at least weekly in 2017*

Smoking Prevalence in adults - current smokers (APS) 2017

Area	Count	Value	Proportion - %
England	6,456,947	14.9	
Northamptonshire	89,996	15.9	
Corby	8,258	16.0	
Daventry	8,247	12.8	
East Northamptonshire	10,349	14.4	
Kettering	14,163	18.5	
Northampton	36,935	21.5	
South Northamptonshire	6,474	9.2	
Wellingborough	6,085	10.1	

Smoking rates are almost **3 times higher** amongst the lowest earners compared to the highest earners.

Smoking in Pregnancy

14.4% of women were smokers at time of delivery in 2016/17

Corby is **13th Highest** in England for smoking status at time of delivery

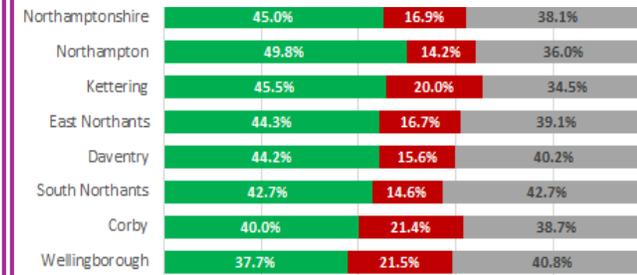
41.1% of pregnant residents who set a quit date stopped smoking in 2016/17

JSNA: Smoking Needs Profile identifies 14 smaller areas within Corby, Northampton and Wellingborough with a combination of risk factors for smoking in pregnancy targeted services.

Smoking at time of delivery increases the risk of **premature birth and neonatal complications, as well as miscarriage and still birth.**

Quit Smoking Rates

Proportion of residents setting a quit date with a stop smoking service who quit, did not quit or unknown, 2016/17



Proportion of pregnant residents setting a quit date with a stop smoking service who quit, did not quit, or unknown in Northamptonshire



Health Burden

1,901

smoking attributable hospital admissions per 100,000 people

571

emergency hospital admissions for COPD* in 2016/17

57.3

deaths per 100,000 people from COPD^

274.8

smoking attributable deaths per 100,000 people

26

smoking attributable deaths from heart disease per 100,000 people

8.8

smoking attributable deaths from stroke per 100,000 people

53.5

deaths from lung cancer per 100,000 people

3.8

deaths from oral cancer per 100,000 people

1,405

potential years of life lost due to smoking related illness per 100,000 people

4.7

stillbirth rate per 1,000 people

3.38

neonatal mortality per 1,000 people



Tobacco is the leading risk factor in disability and early death.

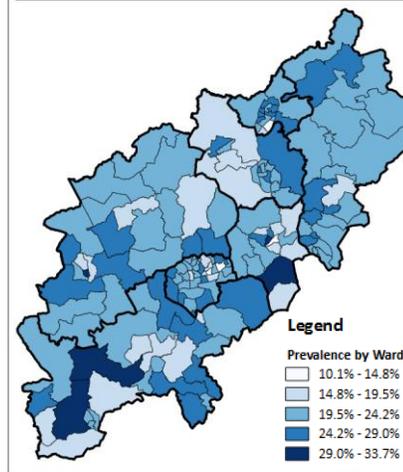
The younger the age of uptake of smoking, the greater the harm is likely to be.

NEARLY 1 in 6



15.5% of people who have completed a health check were identified as current smokers in 2017/18 and present an opportunity for onward referral to stop smoking services.

Northamptonshire multi-morbidity by ward (2011) Prevalence of people with 2 or more chronic conditions



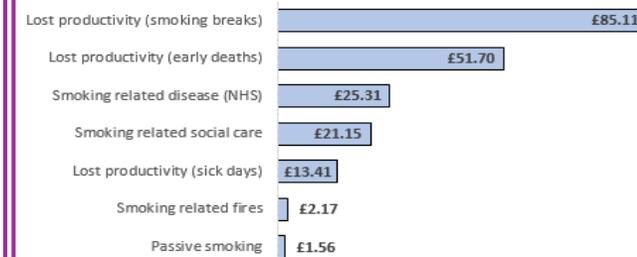
Costs

estimated annual cost of smoking to society is **£200.41m**

It is **£1,871** per smoker

cost per quitter is **£438**

Estimated cost of smoking in Northamptonshire (annual cost to society £millions) (Action on Smoking and Health Ready Reckoner Tool v5.7)



Vision:

For Northamptonshire to become a tobacco free county.

Tobacco remains a leading cause of preventable ill-health and death. The call to action highlights there are inequalities across the county and large system costs associated with tobacco use. A coordinated and comprehensive approach to tobacco prevention / control across Northamptonshire will make smoking less accessible, acceptable and desirable.

Our Priorities/Objectives

Whole system approach

Smoking and tobacco control requires a broad system perspective to frame the problem, understand potential causes, identify critical points of influence, and take effective action through legislation, public health programming and messaging and the health and care system working together to create change.

Achieved through:

- Partnership working (health, local government, workplaces, schools) across the system for all ages.

Prevention of access

Reduction of public access to low cost tobacco products.

Increase Smoke free workplaces and places.

Achieved through:

- Effective enforcement
- Education
- Social marketing - targeted and refining messaging
- Smoke free policies for workplaces

Offer help to quit

Right services at the right time.

Achieved through:

Targeted provision (Secondary and tertiary prevention):

- 'Stop before the op'
- Smoking in pregnancy
- Long term conditions
- MECC* approach at all points of priority quit contact
- Workplaces
- Young people - towards a smokefree future
- Universal services – trained support network

Evidence based approach

We will champion and use effective techniques and via engagement work with partners and partner research, design both at scale and tailored approaches to reduce tobacco smoking.

Achieved through:

- Joint Strategic Needs Assessment (JSNA)
- Return on Investment (ROI) tools
- Evaluation
- Adoption of national policy e.g. Tobacco Control Delivery Plan (2017-22)

Our Commitment/Enablers

Reducing inequalities - services which mitigate inequalities and work to overcome variations - by location, approach and policy.

System partnerships - engage and co-produce with partners / stakeholders e.g. NHS, schools, prisons, workplaces and local government.

Continued investment in prevention and quitting, better access to target populations and promoting MECC*.

Engagement and co-production of research aligning with evidence. Evaluation to monitor and assure service delivery and quality.

Embed Health in all Policies - a common way of influencing the wider determinants of health: creating places that promote good health; governance/policies based on collaboration.

Measures of Success

- Reduction in smoking prevalence (adults) (annual)
- Reducing inequalities across the county
- Reducing access to tobacco - effective enforcement, extending smoke free
- Reduction in young 'replacement' smokers
- Reducing primary and secondary care attendances
- Delivery of MECC training – evaluation and monitoring
- Increasing quarterly quit attempts
- Reduction in smoking at time of delivery (quarterly)
- Improving CO validation for all quits
- Sustaining quits – reducing multiple quit attempts