

# Councillor Briefing: On the path to ending smoking - using the new funding

Briefing

May 2024

## This briefing

This briefing is designed to support councillors to scrutinise local decision-making around how the additional stop smoking service funding announced by the government is allocated. This briefing is adapted for councillors from [a longer briefing developed by ASH in partnership with the DsPH and Humber North Yorkshire's Centre for Tobacco Control Excellence](#) (and reviewed and endorsed by ADPH). The longer briefing aims to support local authorities' decision-making in spending the additional funding accompanying the government's smokefree generation legislation.

### This briefing will cover:

1. The additional funding accompanying the government's proposed smokefree generation legislation.
2. Evidence of what works to increase quit attempts (and subsequent quit success).
3. Recommendations for maximising the opportunities that the additional funding presents.
4. Key actions for Councillors to support this work.

## 1. Additional government funding

The additional funding is outlined in the following table:

What	Purpose	Value
New funding for LA stop smoking support	To increase support for people who smoke to quit	£70 million from 24/25 committed for 5 years
Swap to stop scheme	Give LA led bids access to free vapes to support quitting	£45 million over two years
New enforcement funding	Address illicit products, largely through national agencies	£30 million from 24/25 for 5 years
National mass marketing campaigns	To motivate quitting	£15 million from 24/25 for 5 years
National financial incentive scheme for pregnant women	To increase quitting in pregnancy and among partners	£10 million over two years

From a local authority perspective, there are a limited number of grant conditions for how the new funding for stop smoking support must be used:

1. Invest in stop smoking services and support, in addition to, and while maintaining existing spend from the public health grant.
2. Build capacity to deliver expanded local stop smoking services and support.
3. Build demand for local stop smoking services and support.
4. Deliver increases in the number of people setting a quit date and 4 week quit outcomes, reporting associated activity and financial spend.

The grant letters accompanying the new funding also state that the funding should not be used for enforcement or to fund NHS tobacco dependence treatment services (although collaborations with the NHS are encouraged). Local areas should consider carefully the opportunity cost of funding activities to tackle youth vaping against activities that address the leading preventable cause of death, smoking.

## 2. Evidence of what works to support people to quit

- Nearly half of people who smoke want to quit.
- Around 1 in 3 people who smoke attempted to quit smoking in 2023.
- Around half attempt to quit without support, and only ~3% access specialist stop smoking support.

**Increasing quit attempts** is key to increasing quit success across the whole population. We need to encourage more people who smoke to make quit attempts more often. This will increase their chances of success, as we know that most will need multiple quit attempts to have long-term success.

**Stop smoking support** can improve chances of quit success, compared with going it alone, and routes should ideally include:

- Specialist support and treatment (especially targeted for priority groups).
- Brief advice and treatment (for those needing encouragement and guidance).
- Self-support for the majority (nicotine replacement, e-cigarettes, digital offers).

**All of these routes** should use effective and feasible methods of treatment and behavioural support. In the real world, varenicline and e-cigarettes are shown to be the most effective methods, with e-cigarettes the most popular too.

## 3. Recommendations to maximise opportunities with the additional funding for local authorities

- I. Review local strategy and partnerships against the goal to end smoking
  - Refresh or renew local strategy for increasing quit attempts, include targets for the whole population and target groups

- Ensure you have a high-functioning Tobacco Control Alliance or equivalent with strong leadership and mandate to deliver your strategy
  - Collaborate at ICB or regional level, share learning and good practice
- II. Increase quit attempts so that nearly half of all people who smoke make a quit attempt each year
- Amplify national mass media campaigns with local and regional communications strategies which connect people with services
  - Consider funding digital models of support
  - Equip the wider workforce to prompt quit attempts and refer to services.
  - Improve referral pathways and increase referrals to services or support
  - Maximise the Swap to Stop scheme to connect smokers to new quitting aids.
- III. Create high-quality stop smoking services to act as hubs of excellence
- Make stop smoking services hubs for the community, supporting people and driving up standards and knowledge in other settings
  - Hubs should offer all treatments recommended by NICE, including e-cigarettes, varenicline, cytisine and combination Nicotine Replacement Therapy (NRT)
  - Prioritise key target groups, take a flexible approach to remove barriers and reduce inequalities
  - Use services to connect people to other support services (e.g. mental health, employment, housing)
  - Ensure all staff are trained to National Centre for Smoking Cessation (NCSCT) standards.

## 4. Key actions for councillors

1. Ensure that there is Councillor representation, ideally someone with health responsibilities, in your local Tobacco Control Alliance who regularly attends meetings.
2. Meet with your Director of Public Health to discuss the ASH/ADPH **briefing** and the recommendations above and ensure that your local authority is on track to maximise the impact of the new funding and utilise this opportunity to improve the health of your population.

Questions to ask your DPH/PH team:

- What local partners are we connected to, are there more we could reach out to? Have we refreshed/are we planning to refresh our tobacco control strategy?

- What kind of links do we have with our ICB? Could they be strengthened?
  - Are there opportunities to collaborate at the regional level?
  - Have we got a local communication strategy to encourage people to make a quit attempt/engage with stop smoking support?
  - How are we targeting disadvantaged groups?
  - Are there opportunities to collaborate with other local spaces to achieve greater levels of impact?
3. Support the Tobacco and Vapes Bill by writing to your MP to ask for their support for the Bill. ASH and other leading health organisations have published a **briefing** for parliamentarians on raising the age of sale. You can see how each MP voted at 2<sup>nd</sup> reading here:  
<https://votes.parliament.uk/votes/commons/division/1787>

## Other useful resources:

- [Local stop smoking services and support: guidance for local authorities](#)
- [Local stop smoking services and support: funding allocations and methodology](#)
- [Toolkit for developing a system-wide tobacco control programme](#)
- [10 high impact actions for local authorities and their partners](#)
- [ASH Ready Reckoner](#)