



## DEBATE PACK

Number CDP 2018/0185, 17 July 2018

# The Tobacco Control Plan

This pack has been prepared ahead of the General Debate to be held in the Commons Chamber on Thursday 19 July 2018 on the Tobacco Control Plan.

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The House of Commons Library prepares a briefing in hard copy and/or online for most non-legislative debates in the Chamber and Westminster Hall other than half-hour debates. Debate Packs are produced quickly after the announcement of parliamentary business. They are intended to provide a summary or overview of the issue being debated and identify relevant briefings and useful documents, including press and parliamentary material. More detailed briefing can be prepared for Members on request to the Library.

# 1. Background

A General debate on the tobacco control plan will take place in the Commons Chamber on 19 July 2018.

The Government published a new Government tobacco plan, [Towards a smoke-free generation: tobacco control plan for England 2017](#) in July 2017. This contained four national ambitions for tobacco control:

- **The first smoke-free generation:** the plan aims to reduce the prevalence of smoking amongst young people (for 15 year olds – from 8% to 3% or less) and adults (from over 15% to 12% or less) and reduce the inequality in smoking prevalence by the end of 2022;
- **A smokefree pregnancy for all:** the plan aims to reduce smoking in pregnancy from over 10% to 6% or less by the end of 2022;
- **Parity of esteem for those with mental health conditions:** the plan aims to improve data collection for smoking and mental health and make all mental health sites smokefree by 2018; and
- **Backing evidence based innovations to support quitting:** this ambition includes helping individuals to quit smoking by using innovative technology and maximising the availability of safer alternatives (such as electronic cigarettes).

Health organisations welcomed the publication of the plan and the targets set out within it, especially an ambition to tackle health inequality, a focus on mental health and the inclusion of recommendations about e-cigarettes. However, there were some concerns expressed about a reduction in funding for public health and how this will impact on local smoking cessation services.

[A July 2018 report](#), published by NHS digital reported that the number of adult smokers in England had dropped by around 1.6m between 2011 and 2017. However, it also highlighted that 10.8% of pregnant women in England remained smokers at the time of delivery, well above the national ambition of 6%, and that smoking contributed to 484,700 of all hospital admissions in 2016/17 (an increase of 2% from the previous year).

More information about the tobacco control plan and reactions to this are provided in the November 2017 Library briefing paper, [Tobacco control policy overview](#).

A number of other Commons Library briefing papers provide more background information on specific policies and issues:

- [Regulation of e-cigarettes](#) (please note that since the publication of this paper, Public Health England published an updated [E-cigarettes and heated tobacco products: evidence review](#) in February 2018)
- [Advertising of e-cigarette products \(June 2017\)](#)
- [Prohibition of tobacco display in shops \(June 2017\)](#)

- [Prohibition of tobacco vending machines \(June 2017\)](#)
- [Smoking in public places \(March 2015\)](#)

This debate pack provides recent press and Parliamentary material on tobacco control policy and the 2017 Tobacco Control Plan.

## 2. News items

Observer

### **Smokers forced to quit on their own after funding cuts**

15 July 2018

<https://www.theguardian.com/society/2018/jul/15/smokers-prescriptions-nhs-funding-cuts-england>

Guardian

### **Britain is winning the war on tobacco, health chief insists**

3 July 2018

<https://www.theguardian.com/society/2018/jul/03/britain-is-winning-the-war-on-tobacco-health-chief-insists>

Pharmaceutical Journal

### **E-cigarettes should be available on prescription, Public Health England says**

7 February 2018

<https://www.pharmaceutical-journal.com/news-and-analysis/news/e-cigarettes-should-be-available-on-prescription-public-health-england-says/20204369.article?firstPass=false>

Independent

### **Has the UK's anti-smoking efforts reached its peak?**

6 February 2018

<https://www.independent.co.uk/news/are-the-uks-antismoking-efforts-enough-a8187491.html>

BBC News Online

### **Most people who try one cigarette become daily smokers, study says**

10 January 2018

<https://www.bbc.co.uk/news/health-42619664>

Independent

**Tobacco companies using pricing tactics to 'keep smokers hooked', research suggests**

30 October 2017

<https://www.independent.co.uk/news/business/news/tobacco-companies-pricing-tactics-smokers-hooked-university-of-bath-kings-college-london-rosemary-a8026386.html>

Independent

**Smoking ban: Number of UK smokers falls by nearly two million in 10 years**

1 July 2017

<https://www.independent.co.uk/news/health/smoking-ban-uk-smokers-numbers-fall-two-million-19-cigarettes-tobacco-drop-10-years-a7817236.html>

## 3. Press releases

### NHS Digital

#### **Around 1.6 million fewer adult smokers in England in six years**

**3 July 2018**

*NHS Digital must be quoted as the source of this information.*

The number of adult smokers in England has dropped by around 1.6m between 2011 and 2017<sup>2</sup>, official figures released by NHS Digital, Public Health England and the Office for National Statistics (ONS)<sup>3</sup> show.

The term 'smokers' covers those who smoke tobacco cigarettes.

The number of adult smokers<sup>4</sup> has dropped from 7.7m (19.8% of adults) in 2011 to 6.1m (14.9%) in 2017<sup>5</sup>.

The prevalence of adult smokers in all of the UK was 15.1%. Of the constituent countries, England had the lowest (14.9%). Prevalence was 16.5% in Northern Ireland, 16.3% in Scotland, and 16.1% in Wales<sup>6</sup>.

The Statistics on Smoking, England: 2018 report is a compendium report published by NHS Digital of both new and already published data on smoking in England, including figures on prevalence of smoking amongst adults and young people, prescriptions data, E-cigarette prevalence, hospital admissions and mortality attributable to smoking, and selected local level analyses.

The report also shows that:

#### *Smoking during pregnancy<sup>7</sup>*

- Just under 11% of pregnant women were known to be smokers at the time of delivery in 2017/18. This is similar to the level recorded in 2016/17, but down from 16% in 2006/07.

#### *Smoking related ill-health and mortality<sup>8</sup>*

There were 484,700 estimated hospital admissions attributable to smoking in 2016/17, an increase of two per cent on 2015/16 (474,300) and an increase of nine per cent on 2006/07 (444,700). For males, this accounted for six per cent of all hospital admissions and for females, this accounted for three per cent of all admissions<sup>9</sup>.

- Blackpool, Manchester, Kingston upon Hull, Sunderland and Hartlepool all recorded smoking attributable hospital admission rates above 3,000 per 100,000 population while Wokingham had the lowest rate (969 per 100,000 population), followed by Windsor and Maidenhead (1,051), Isle of Wight (1,082) and Redbridge (1,091)<sup>10</sup>.
- There were an estimated 77,900 deaths attributable to smoking in 2016, a decrease of two per cent on 2015 (79,100) and a decrease of seven per cent on 2006 (83,400)<sup>11</sup>. For males, this

accounted for 20% of all deaths, and for females, this accounted for 12% of all deaths<sup>12</sup>.

#### *Prevalence*

- Adults aged 25 to 34 were most likely to smoke (20%), whilst those aged 65 and over were least likely to smoke (eight per cent)<sup>13</sup>.
- Six per cent of pupils aged between 11 and 15 reported they were current smokers in 2016, from 22% in 1996<sup>14</sup>.

#### *Prescription items<sup>15</sup>*

- The number of items<sup>16</sup> dispensed as an aid to stop smoking in England was 0.86 million in 2017/18, compared to 2.48 million in 2007/08 and a peak of 2.56 million in 2010/11
- NHS Bradford City CCG had the highest rate of items dispensed in 2017/18 at 40 per 1,000 population, whilst NHS Wyre Forest and NHS Redditch and Bromsgrove both recorded rates of less than 1 per 1,000 population.

#### *E-cigarette prevalence*

- Prevalence in 2017 for adults remained similar to 2016, at five per cent, an increase from four per cent in 2014<sup>17</sup>.
- Adults aged 25 to 34, and 35 to 49 were most likely to use e-cigarettes (eight per cent and seven per cent respectively).
- The most common reason for adults using e-cigarettes was as an aid to quit smoking (48%)
- A quarter of pupils (25%) reported ever having tried e-cigarettes in 2016, an increase from 22% in 2014<sup>18</sup>.

Other information that can be found in this report includes use of NHS Stop Smoking services, young people's attitudes to smoking, household expenditure on tobacco and exposure to second hand smoke.

Read the full report

[Statistics on Smoking, England: 2018](#)

#### *Notes to editors*

1. NHS Digital is the national information and technology partner of the health and care system. Our team of information analysis, technology and project management experts create, deliver and manage the crucial digital systems, services, products and standards upon which health and care professionals depend. During the 2017/18 financial year, NHS Digital published 275 statistical reports. Our vision is to harness the power of information and technology to make health and care better.
2. 2011 was the first year that data was fully completed in the Annual Population Survey.

3. The Office for National Statistics (ONS) is the UK's largest independent producer of official statistics and the recognised national statistical institute of the UK.
4. These figures refer to the number of adults that currently smoke. Current smokers are defined as those who answered "Yes" to "Have you ever smoked cigarettes regularly?" and "Do you smoke cigarettes at all nowadays?".
5. Figures sourced from the [ONS: Adult smoking habits, Annual Population Survey, 2017](#)
6. Figures sourced from the [ONS: Adult smoking habits, Annual Population Survey, 2017](#)
7. Figures sourced from [Smoking Status at Time of Delivery 2017/18](#)
8. The estimates of the proportion of hospital admissions and deaths attributable to smoking are calculated following a recognised methodology. This uses the proportions of current and ex-smokers in the population and the relative risks of these people dying from specific diseases or developing certain non-fatal conditions compared with those who have never smoked. See Appendix B for further details. Figures presented relate to people aged 35 and over, as relative risks are only available for this age group.
9. Figures sourced from NHS Digital's Hospital Episode Statistics
10. Figures sourced from Public Health England's Local Tobacco Control Profiles
11. Figures sourced from NHS Digital's Hospital Episode Statistics
12. Figures sourced from the [ONS: Adult smoking habits, Annual Population Survey, 2017](#)
13. Figures sourced from the [ONS: Adult smoking habits, Annual Population Survey, 2017](#)
14. Figures sourced from NHS Digital's [Smoking, drinking and drug use among young people, 2016](#)
15. Figures sourced from NHS Prescription Service's [Prescription Analysis and Cost \(PACT\)](#) data
16. Prescriptions are written on a prescription form known as a FP10. Each single item written on the form is counted as a prescription item
17. Figures sourced from [ONS: Adult smoking habits, Opinions and Lifestyle survey, 2017](#)
18. Figures sourced from NHS Digital's [Smoking, drinking and drug use among young people, 2016](#)
19. For media enquiries please contact [media@nhsdigital.nhs.net](mailto:media@nhsdigital.nhs.net) or telephone 0300 30 33 888.

## Action on Smoking and Health (ASH)

### Smoking rates at a record low: but not for poorer or pregnant smokers

**3 July 2018**

Overall smoking rates for 2017 have just been published for England, and are at all-time low of 14.9%, down from 19.3% just five years ago [1]. This brings the estimated number of smokers in England in 2017 to 6.1 million, 1.6 million fewer than in 2011. This progress is thanks to the world-leading strategy implemented by successive Governments to support more people to quit and prevent children from taking up smoking.

However, the new figures also reveal that there is no room for complacency. Action is urgently needed to address the lack of progress in reducing smoking rates among pregnant women and the growing gap in smoking rates between rich and poor.

One in four people in routine and manual occupations smoke compared to one in ten in professional and managerial occupations. The data published today shows that this gap is widening over time, not reducing in line with the ambition set out in the Tobacco Control Plan for England published last year [2]. The Government is also failing to meet its target for reducing smoking in pregnancy, with smoking rates stuck at 11% for the last three years.

Deborah Arnott chief executive of health charity ASH said:

ASH supports the Government's vision, set out in the Tobacco Control Plan for England, of a smokefree generation. But smoking must become history for all of society not just for the wealthy. Cuts in public health funding and lack of treatment for smoking on the NHS mean poorer more heavily addicted smokers, including those who are pregnant, are not getting the help they need to quit.

The Smoking in Pregnancy Challenge Group has today published a report [3] setting out its recommendations for ensuring that the Government target is met, of reducing smoking in pregnancy to 6% or less by 2022. Key is ensuring the right support is integrated into NHS care, something all smokers would benefit from.

Commenting on the report, Francine Bates, Chief Executive, The Lullaby Trust and Co-Chair of the Smoking in Pregnancy Challenge Group said:

This report should be a wake-up call. On the current trajectory, the Government will miss its ambition to reduce rates of smoking among pregnant women with tragic consequences. We have made real progress in the past in helping women to have smokefree pregnancies and we must be ambitious about what can be achieved in the future to protect thousands of families from entirely preventable and heartbreaking outcomes.

The full report and recommendations are

health outcomes which would be avoided if government targets for the reduction in smoking in pregnancy were achieved.

Last week the Royal College of Physicians published a report calling for support to smokers to be fully embedded throughout the NHS with the potential to save thousands of lives and millions of pounds [4]. Stepping up the care provided by the NHS would help to address the the big differences in smoking rates between social groups.

Notes and Links:

Action on Smoking and Health is a health charity working to eliminate the harm caused by tobacco use. For more information see: [www.ash.org.uk/about-ash](http://www.ash.org.uk/about-ash)

ASH receives funding for its programme of work from Cancer Research UK and the British Heart Foundation.

ASH staff are available for interview and have an ISDN line. For more information contact ASH on 020 7404 0242 or out of hours Deborah Arnott on 07976 935 987 or Hazel Cheeseman on 07754 358 593.

*References*

[1] NHS Digital <https://digital.nhs.uk/news-and-events/latest-news/around-1.6-million-fewer-adult-smokers-in-england-in-six-years>

[2] Department of Health, Towards a Smokefree Generation; Tobacco Control Plan for England, 2017 <https://www.gov.uk/government/publications/towards-a-smoke-free-generation-tobacco-control-plan-for-england>

[3] Smoking in Pregnancy Challenge Group, A Review of the Challenge, 2018

Full report: <http://ash.org.uk/information-and-resources/reports-submissions/reports/smoking-in-pregnancy-challenge-group-review-of-the-challenge-2018/>

Press release: <http://smokefreeaction.org.uk/smoking-in-pregnancy-challenge-group-review-of-the-challenge-2018/>

[4] Royal College of Physicians, Hiding in plain sight; treating tobacco dependency in the NHS, 2018 <https://www.rcplondon.ac.uk/news/innovation-medicine-2018-providing-smoking-cessation-patients-hospitals-will-save-lives-and>

## **Smokefree Action Smoking in Pregnancy Challenge Group**

### **New report calls for Government action as smoking in pregnancy rates are feared to be stalling**

**3 July 2018**

On the morning new Government data on smoking in pregnancy is published [1] (Tuesday 3rd July 2018) the Smoking in Pregnancy Challenge Group, a coalition of health and maternity organisations, calls for bold Government action to tackle smoking in pregnancy.

Their new report [2] shines light on the progress towards the Government's ambition to reduce the smoking in pregnancy rate to less than 6% by 2022 [3] and warns that unless more is done this ambition is unlikely to be met.

The report includes a new analysis [4] estimating the positive impact of achieving the Government's stated ambition. It estimates that in 2022 this would mean that around 30,000 fewer women would be smoking in pregnancy. Leading to:

- 45 – 73 fewer babies stillborn
- 11 – 25 fewer neonatal deaths
- 7 – 11 fewer sudden infant deaths
- 482 – 796 fewer preterm babies and
- 1455 – 2407 fewer babies born at a low birth weight.

Avoiding these tragic outcomes will only be possible if rates of smoking in pregnancy come down.

The report is released on the same day as official Government figures on the rates of smoking in pregnancy are due to be published. There are concerns these figures will show no change in rates of smoking among pregnant women for over a year.

The Challenge Group makes a number of recommendations to increase the pace of change including:

- National action to ensure that all areas have evidence-based services and processes in place to identify, refer and support pregnant women who smoke to quit and address the large variation in performance around the country.
- Increase support for women from disadvantaged backgrounds where smoking in pregnancy rates are highest. This should include greater use of incentive schemes, supporting women between pregnancies and providing support to fathers and other household members.
- Increase use of alternative sources of nicotine to support pregnant women in their quit attempts. Health professionals and women often hold misconceptions about using Nicotine Replacement Therapy and e-cigarettes as part of quit attempts.
- Address gaps in training for midwives, obstetricians and health visitors. Stopping smoking is part of ensuring a safe pregnancy and should be a basic part of training.

Commenting on the report, Francine Bates, Chief Executive, The Lullaby Trust and Co-Chair of the Smoking in Pregnancy Challenge Group said:

This report should be a wake-up call. On the current trajectory, the Government will miss its ambition to reduce rates of smoking among pregnant women with tragic consequences. We have made real progress in the past in helping women to have smokefree pregnancies and we must be ambitious about what

can be achieved in the future to protect thousands of families from entirely preventable and heartbreaking outcomes.

Prof. Linda Bauld, University of Stirling and Deputy Director, UK Centre for Tobacco and Alcohol Studies and Co-Chair of the Smoking in Pregnancy Challenge Group added:

There is great evidence about what can help reduce smoking in pregnancy, but we are simply not using this evidence to provide support to all women. At the very least every woman should receive care that meets the guidance set out by NICE. But we should go further and integrate this with wider use of incentive schemes, greater support to help Dad's to quit and ensure that women have access to nicotine products that can help make their quit attempt a success.

ASH Chief Executive Deborah Arnott said:

We are deeply concerned that lack of progress in supporting pregnant women to quit indicates that the system is not working for pregnant smokers. There have been big cuts to the support available to all smokers to help them quit both within the NHS and from local authorities. It is right that there should be more targeted support to help women in pregnancy but that support must also be there before and after they have had a baby.

Gill Walton, Chief Executive of the Royal College of Midwives said:

As a profession we are committed to ensuring the women we care for have the safest possible pregnancy. Stopping smoking is part of achieving this. However, the provision in place around the country is not consistent. Some Midwives have access to excellent training, the equipment they need and have high quality stop smoking services available for the women they support. Investment is needed to ensure that this is universal.

The Challenge Group is also publishing resources to support training of midwives and other health professionals to address smoking in pregnancy. These will also be available for the Challenge Group webpage from Tuesday morning:

[www.smokefreeaction.org.uk/smokefree-nhs/smoking-in-pregnancy-challenge-group/](http://www.smokefreeaction.org.uk/smokefree-nhs/smoking-in-pregnancy-challenge-group/)

*Notes and Links:*

The Smoking in Pregnancy Challenge Group was established in 2012 in response to a challenge from the then Public Health Minister to produce recommendations on how the smoking in pregnancy ambition contained in the Government's tobacco strategy could be realised.

The Group is a partnership between professional organisations, the voluntary sector and academia. It presented its report and recommendations to the Public Health Minister in June 2013 and continues to meet annually to review progress.

The Smoking in Pregnancy Challenge Group is jointly chaired by Francine Bates, Chief Executive of The Lullaby Trust, and Professor Linda Bauld of UKCTAS and the University of Sterling.

Members of the Challenge Group are available for interview. For more information contact ASH on 020 7404 0242 or out of hours Hazel

Cheeseman on 07754 358 593.

*References:*

[1] Annual Smoking at Time of Delivery data is due to be published at 9.30 am on Tuesday 3rd July by NHS Digital this data is available down to local level. It will provide an annual figure for the rate of smoking in pregnancy for 2017/18. Data to Q3 for 2017/18 have already been published here: <https://digital.nhs.uk/data-and-information/publications/statistical/statistics-on-women-s-smoking-status-at-time-of-delivery-england/statistics-on-women-s-smoking-status-at-time-of-delivery-england-quarter-3-2017-18>

[2] Smoking in Pregnancy Challenge Group, A Review of the Challenge, 2018. The full report is available on request and will be live here Tuesday morning: [www.smokefreeaction.org.uk/smokefree-nhs/smoking-in-pregnancy-challenge-group/](http://www.smokefreeaction.org.uk/smokefree-nhs/smoking-in-pregnancy-challenge-group/)

[3] Department of Health, Towards a Smokefree Generation; Tobacco Control Plan for England, 2017 <https://www.gov.uk/government/publications/towards-a-smoke-free-generation-tobacco-control-plan-for-england>

[4] The Lullaby Trust has undertaken this analysis on behalf of the Challenge Group with funding from Tommy's, Sands, Tamba and ASH. The Lullaby Trust raises awareness of sudden infant death syndrome (SIDS), provides expert advice on safer sleep for babies and offers emotional support for bereaved families. The full analysis and methodology is available on request and will be live here Tuesday morning: [www.smokefreeaction.org.uk/smokefree-nhs/smoking-in-pregnancy-challenge-group/](http://www.smokefreeaction.org.uk/smokefree-nhs/smoking-in-pregnancy-challenge-group/)

## **Royal College of Physicians**

### **Innovation in Medicine 2018: Providing smoking cessation for patients in hospitals will save lives and money**

**26 June 2018**

A major new report released today by the Royal College of Physicians (RCP) calls for a radical change in the way the NHS treats smoking, by providing opt-out cessation services as a routine component of all hospital care.

The report, [Hiding in plain sight: Treating tobacco dependency in the NHS](#), says that giving smokers the help they need to quit smoking while in hospital will save lives, improve quality of life as well as increasing life expectancy, and help to reduce the current £1 billion per year cost to the NHS of smoking by patients and staff.

It also argues that:

- Treating tobacco dependency is not just about preventing disease: in many cases it represents effective disease treatment.

Clinicians working in all areas of medicine can improve their patients' lives by helping them to quit.

- Current models of delivering stop smoking services separately from mainstream NHS services, while successful in the past, may now not be the best approach because the patient has to seek help themselves
- Most health professionals receive little or no training in treating smokers
- The NHS does not collect data on smoking treatment delivery, or have a payment tariff for treating tobacco dependency
- Smoking treatment also tends to be squeezed out, even in the management of diseases caused by smoking, by other, less cost-effective interventions.

#### *Key recommendations*

To address all these issues, the report recommends:

- As smoking cessation treatments save money for the NHS, in the short as well as the long term, they should be prioritised as a core NHS activity.
- Smoking cessation should be incorporated, as a priority, as a systematic and opt-out component of all NHS services as a complement to local authority services, and delivered in smoke-free settings. It is unethical to do otherwise.
- As systematic identification of smokers and delivering cessation support doubles quit rates, health service commissioners should ensure that smokers are identified and receive cost-effective smoking interventions – failing to do so is as negligent as not treating cancer.
- We should allow e-cigarettes to be used on NHS sites to support smokers to remain smoke-free and help to sustain smoke-free policies.
- Legislation requiring hospitals to implement completely smoke-free grounds should be introduced, as the current guidance isn't being implemented.
- Training in smoking cessation should be introduced into all undergraduate and postgraduate healthcare professional training curricula and as mandatory training for the entire NHS healthcare professional workforce.

Professor John Britton, chair of the RCP's Tobacco Advisory Group and lead editor of the report, said:

Treating the more than one million smokers who are admitted to hospitals every year represents a unique opportunity for the NHS to improve patients' lives, while also saving money. For too long the NHS has failed to take responsibility for smoking, while prioritising other, less effective activity.

Smoking, the biggest avoidable cause of death and disability in the UK, is hiding in plain sight in our hospitals and other NHS services; the NHS must end the neglect of this huge opportunity to improve our nation's health.

Dr Sanjay Agrawal, consultant in respiratory and intensive care medicine, University Hospitals of Leicester NHS Trust and a member of the RCP Tobacco Advisory Group, said:

This is an 'open goal' for the NHS. We can save lives and save money by applying simple effective treatments in the same way that we do for millions of other patients - these treatments are very low cost. The changes would be pretty straightforward to make and we would start reaping the benefits in the first year, taking some of the strain off the NHS.

The changes we have recommended have been tried and tested in the UK and Canada and have made a significant impact, so it's time to apply this approach across the NHS.

## **Action on Smoking and Health (ASH)**

### **True cost of smoking revealed in advance of World No Tobacco Day**

**30 May 2018**

New data published for World No Tobacco Day 31st May, by Action on Smoking Health shows that smoking costs communities in England £12.6 billion a year [1].

The figures show the additional pressure that smoking is putting on the NHS and social care services including annual costs of £2.5 billion to the NHS, and over £760 million to local authorities from smoking-related social care needs [1]. Local authorities can use an easily accessible web tool to break the data down to local level so they can see the impact on their communities [1].

Smoking remains the largest cause of preventable death in England. However, a 2016 audit found that more than 1 in 4 hospital patients were not asked if they smoke and 50% of frontline staff are not given routine smoking cessation training [2].

ASH Chief Executive Deborah Arnott said:

The Five Year Forward View calls for a 'radical upgrade in prevention and public health' but this has not been followed through and smokers are not getting the support they need to quit from the NHS. In some areas, Local Authority Stop Smoking Services have been reduced due to cuts in local authority funding. Cuts to public health budgets need to be reversed and the NHS needs to step-up and play a larger role in supporting smokers to quit.

Given the enormous burden tobacco places on society, ASH argues that the tobacco industry should be forced to pay to address the harm it causes in line with the 'polluter pays' principle [3]. It is estimated that

tobacco companies in the UK make a collective annual profit of around £1 billion [4]. ASH calls for the Government to place a levy on the tobacco industry with the money raised used to fund support for the recurring costs of tobacco control measures to reduce smoking prevalence, such as mass media campaigns, cessation services and local authority enforcement to prevent illicit trade and underage sales.

The theme of World No Tobacco Day this year is tobacco and heart disease. The British Heart Foundation has been awarded the World No Tobacco Day medal for their long standing work tackling the harm caused by tobacco.

Simon Gillespie, Chief Executive of BHF said:

Smoking kills over 16,000 people in England every year from heart disease; a total of 20,000 across the UK. Many more people continue to live with smoking related heart problems. It is vital that tobacco control is properly funded, giving smokers the best chance to quit and preventing people from taking up smoking. A levy on tobacco companies would ensure there is sustained funding for tobacco control thus crucially help to drive down smoking rates.

*References:*

- [1] Action on Smoking and Health (ASH). Local Costs of Tobacco Tool. 2018. <http://ash.lelan.co.uk/>
- [2] Agrawal S and Mangera Z. Smoking Cessation Audit Report: Smoking cessation policy and practice in NHS hospitals. British Thoracic Society. 2016. <https://www.brit-thoracic.org.uk/media/315359/BTS-Smoking-Cessation-Audit-Report-7-December-2016-final.pdf>
- [3] Smoking Still Kills, 2015 – this report produced by ASH and funded by Cancer Research UK and endorsed by 129 organisations, set out the case for making the ‘polluter pay’ and placing a levy on the tobacco industry to fund work to reduce the number of people who smoke. <http://ash.org.uk/information-and-resources/reports-submissions/reports/smoking-still-kills/>
- [4] Branston JR, Gilmore AB. The extreme profitability of the UK tobacco market and the rationale for a new tobacco levy. University of Bath. 2015. <http://opus.bath.ac.uk/43061/>

## **Royal College of GPs**

### **Stop smoking services should be available to all smokers, says RCGP**

**28 March 2018**

Responding to new advice from NICE and Public Health England that aims to help patients stop smoking, Professor Helen Stokes-Lampard, Chair of the Royal College of GPs, said:

This is helpful advice from NICE and PHE, particularly as it clarifies the messages that GPs and our teams should be giving to patients

who are trying to stop smoking and who ask about switching to e-cigarettes - guidance that the College has long been calling for.

Smoking can have a devastating effect on our patients' long-term health and wellbeing – it is the biggest preventable cause of death in the UK with strong evidence linking it to serious and debilitating conditions, such as cancer, lung and heart disease, and diabetes. It also costs the NHS billions every year.

GPs will always advocate that our patients should stop smoking, as well as making other lifestyle changes that can help them lead longer and healthier lives. But helping patients to stop smoking is not just about GPs having conversations with our patients during consultations - there also needs to be enough resources and services in the community, such as smoking cessation centres, that can be of great benefit for patients trying to quit, but which GPs often find to be oversubscribed, or access patchy across the country.

It makes sense that priority access is given to patients according to certain circumstances, for example, if they are preparing for elective surgery and stopping smoking could clearly aid their recovery, but services that aim to help patients stop smoking should be available to all patients who could benefit from them throughout the UK.

"t's certainly good to hear that overall smoking rates are falling, but while millions of people still smoke in the UK, there is clearly more to do – and only by working together as a society can we tackle this issue head on.

## **Public Health England**

### **PHE publishes independent expert e-cigarettes evidence review**

**6 February 2018**

A new Public Health England (PHE) e-cigarette evidence review, undertaken by leading independent tobacco experts, provides an update on PHE's 2015 review.

The report covers e-cigarette use among young people and adults, public attitudes, the impact on quitting smoking, an update on risks to health and the role of nicotine. It also reviews heated tobacco products.

*The main findings of PHE's evidence review are that:*

- vaping poses only a small fraction of the risks of smoking and switching completely from smoking to vaping conveys substantial health benefits
- e-cigarettes could be contributing to at least 20,000 successful new quits per year and possibly many more
- e-cigarette use is associated with improved quit success rates over the last year and an accelerated drop in smoking rates across the country

- many thousands of smokers incorrectly believe that vaping is as harmful as smoking; around 40% of smokers have not even tried an e-cigarette
- there is much public misunderstanding about nicotine (less than 10% of adults understand that most of the harms to health from smoking are not caused by nicotine)
- the use of e-cigarettes in the UK has plateaued over the last few years at just under 3 million
- the evidence does not support the concern that e-cigarettes are a route into smoking among young people (youth smoking rates in the UK continue to decline, regular use is rare and is almost entirely confined to those who have smoked)

PHE's evidence review comes just a few weeks after a US National Academies of Sciences, Engineering and Medicine report on e-cigarettes. Their conclusion on e-cigarette safety also finds that based on the available evidence 'e-cigarettes are likely to be far less harmful than combustible tobacco cigarettes.'

Professor John Newton, Director for Health Improvement at PHE said:

Every minute someone is admitted to hospital from smoking, with around 79,000 deaths a year in England alone.

Our new review reinforces the finding that vaping is a fraction of the risk of smoking, at least 95% less harmful, and of negligible risk to bystanders. Yet over half of smokers either falsely believe that vaping is as harmful as smoking or just don't know.

It would be tragic if thousands of smokers who could quit with the help of an e-cigarette are being put off due to false fears about their safety.

Professor Ann McNeill, lead author and Professor of Tobacco Addiction at King's College London said:

It's of great concern that smokers still have such a poor understanding about what causes the harm from smoking. When people smoke tobacco cigarettes, they inhale a lethal mix of 7,000 smoke constituents, 70 of which are known to cause cancer.

People smoke for the nicotine, but contrary to what the vast majority believe, nicotine causes little if any of the harm. The toxic smoke is the culprit and is the overwhelming cause of all the tobacco-related disease and death. There are now a greater variety of alternative ways of getting nicotine than ever before, including nicotine gum, nasal spray, lozenges and e-cigarettes.

Professor Linda Bauld, author and Professor of Health Policy, University of Stirling and Chair in Behavioural Research for Cancer Prevention, Cancer Research UK said:

Concern has been expressed that e-cigarette use will lead young people into smoking. But in the UK, research clearly shows that regular use of e-cigarettes among young people who have never smoked remains negligible, less than 1%, and youth smoking continues to decline at an encouraging rate. We need to keep closely monitoring these trends, but so far the data suggest that e-cigarettes are not acting as a route into regular smoking amongst young people.

PHE is calling on smokers and a number of bodies to act on the evidence.

#### *Smokers*

Anyone who has struggled to quit should try switching to an e-cigarette and get professional help. The greatest quit success is among those who combine using an e-cigarette with support from a local stop smoking service.

#### *Local stop smoking services and healthcare professionals*

These should provide behavioural support to those smokers wanting to quit with the help of an e-cigarette. A new training course on e-cigarettes for healthcare professionals by the National Centre for Smoking Cessation and Training is now live.

#### *Medicines and Healthcare products Regulatory Agency (MHRA)*

MHRA continue their work in regulating and licensing e-cigarette products and support manufacturers to expedite the licensing of e-cigarettes as medicinal quit aids. PHE believes there is compelling evidence that e-cigarettes be made available to NHS patients.

#### *NHS Trusts*

To become truly smokefree, Trusts should ensure

- e-cigarettes, alongside nicotine replacement therapies are available for sale in hospital shops
- vaping policies support smokers to quit and stay smokefree
- smoking shelters be removed
- frontline staff take every opportunity to encourage and support patients to quit

The government's new Tobacco Control Plan for England includes a commitment to 'maximise the availability of safer alternatives to smoking'. It makes clear that e-cigarettes have an important part to play in achieving the ambition for a smokefree generation.

#### *Background*

1. Read the report commissioned by PHE - [Evidence review of e-cigarettes and heated tobacco products](#) - McNeill A, Brose LS, Calder R, Bauld L & Robson D (2018).
2. Over the past few years, e-cigarette use has hovered at just under 6% of the adult population in Britain. The most common reason for e-cigarette use continues to be to help with quitting and they are the most popular quitting tool in England. At the same time, quit success rates have been improving and we are also seeing an accelerated drop in smoking rates (currently 15.5% in England): [smokinginengland.info/latest-statistics](http://smokinginengland.info/latest-statistics).
3. 79,000 people in England die every year as a result of smoking, and over half of long-term smokers will die from a smoking-

related illness if they do not quit: [digital.nhs.uk/catalogue/PUB24228](https://digital.nhs.uk/catalogue/PUB24228).

4. PHE 2015 e-cigarettes evidence review: McNeill A., P. Hajek et al, [E-cigarettes – an evidence update: A report commissioned by Public Health England](#), Public Health England, August.
5. [Authors'note](#) on evidence for 'around 95% safer' estimate.
6. [Nicotine without smoke: tobacco harm reduction](#), Royal College of Physicians, April 2016.
7. [Smoking Toolkit Study](#).
8. ASH (May 2017) [Use of e-cigarettes \(vapourisers\) among adults in Great Britain](#).
9. Bauld, Linda, Anne Marie MacKintosh, Brian Eastwood, Allison Ford, Graham Moore, Martin Dockrell, Deborah Arnott, Hazel Cheeseman, and Ann McNeill. '[Young people's use of e-cigarettes across the United Kingdom: Findings from five surveys 2015–2017.](#)' International journal of environmental research and public health 14, no. 9 (2017): 973.
10. [Towards a Smokefree Generation: A Tobacco Control Plan for England](#) Department of Health, July 2017.
11. [NHS Digital, Statistics on Smoking: England, 2017](#).
12. US National Academies of Sciences, Engineering, and Medicine (January 2018) [Public Health Consequences of E-Cigarettes](#).

## 4. Parliamentary material

### PQs

#### [Smoking](#)

**Asked by: Shannon, Jim**

To ask the Secretary of State for Health and Social Care, what steps he is taking to ensure that people who smoke are aware of the health risks caused by smoking.

**Answering member: Steve Brine | Department: Department of Health and Social Care**

Alerting the public to the serious risks of smoking, and supporting smokers to quit, are priorities for Public Health England (PHE) and are at the centre of the Government's Tobacco Control Plan for England, published last year.

PHE runs a programme of smoking cessation marketing activity including an annual television and digital advertising campaign focused on tobacco health harms. Information on the harms smoking tobacco causes is available on the Smokefree website and via the Smokefree National Helpline. Further information on PHE's smoking cessation campaigns, including the harm caused by smoking, is available at the following link:

[www.nhs.uk/smokefree](http://www.nhs.uk/smokefree)

PHE provides clinical tools and blogs to support health professionals to advise their patients about the risks of smoking. PHE also supports Health Education England and the National Centre for Smoking Cessation and Training, which provide a range of resources and guidance to help people stop smoking.

**HC Deb 17 July 2018 | PQ 162069**

#### [NHS: Costs](#)

**Asked by: Robertson, Mr Laurence**

To ask the Secretary of State for Health and Social Care, what the cost to the public purse was of NHS treatment for people with (a) smoking-related, (b) alcohol-related and (c) obesity-related illnesses in the most recent year for which data are available.

**Answering member: Steve Brine | Department: Department of Health and Social Care**

'Towards a smokefree generation: A Tobacco Control Plan for England 2017-2022', published in July 2017, suggests that in 2014/15, smoking cost the National Health Service in England £2.5 billion. The figure quoted includes the cost of treating smokers in primary and secondary

care, general practitioner visits, nurse visits, prescriptions, outpatient visits and hospital admissions.

Data on NHS spending on treatment of alcohol related conditions is not collected centrally. However, the costs to the NHS in England associated with alcohol misuse are estimated at £3.5 billion each year.

'The economic burden of ill health due to diet, physical inactivity, smoking, alcohol and obesity in the UK: an update to 2006-07 NHS costs' estimated that overweight and obesity cost the NHS in the United Kingdom £5.1 billion per year. This figure was uplifted to £6.1 billion in 2014/15 to take account of inflation.

**HC Deb 28 June 2018 | PQ 155666**

[Smoking](#)

**Asked by: Howarth, Mr George**

To ask the Secretary of State for Health and Social Care, when he plans to publish the implementation plan for the Government's tobacco control plan entitled Towards a smoke-free generation, published in July 2017.

**Answering member: Steve Brine | Department: Department of Health and Social Care**

The implementation plan, known as The Tobacco Control Delivery Plan 2018-2022, developed to support delivery of the Tobacco Control Plan for England was published on 7 June 2018 and is available on Gov.uk.

**HC Deb 13 June 2018 | PQ 149939**

[Smoking](#)

**Asked by: Howarth, Mr George**

To ask the Secretary of State for Health and Social Care, what progress his Department has made with Public Health England Tobacco Implementation Board on implementing the recommendations of the Independent Cancer Taskforce; on what date his Department has held meetings with that Board; and who attended those meetings.

**Answering member: Steve Brine | Department: Department of Health and Social Care**

The 'Tobacco Control Plan for England: Towards a smoke-free generation', published in July 2017, takes into account the recommendations of the Independent Cancer Taskforce, and focuses on reducing smoking prevalence within priority groups such as people with mental health conditions, people in routine and manual occupations and pregnant women, tackling the associated health inequalities.

A special meeting of the Public Health England Tobacco Control Implementation Board was held on 20 December 2017 to discuss the Plan. I chaired the meeting which was attended by representatives of

the Department, Public Health England and key stakeholders including Cancer Research UK, the Royal College of Physicians, British Medical Association, British Thoracic Society, Action on Smoking and Health and the UK Centre for Tobacco and Alcohol Studies.

**HC Deb 13 June 2018 | PQ 149935**

### [Electronic Cigarettes](#)

**Asked by: Afriyie, Adam**

To ask the Secretary of State for Health and Social Care, what assessment he has made of the effect of the use of electronic vaping devices on smoker mortality levels.

**Answering member: Steve Brine | Department: Department of Health and Social Care**

The Department has been clear that for smokers, quitting smoking completely is the best way to improve health. E-cigarettes are not risk free. However evidence continues to suggest that e-cigarettes are significantly less harmful to health than cigarettes and can aid in helping smokers to quit.

Given that e-cigarettes are a relatively new product, there is no long term data available regarding the impact on mortality rates of smokers who opt to move to vaping as an alternative.

The Department will continue to work with Public Health England (PHE) to monitor the evidence base around e-cigarettes. In the Tobacco Control Plan, published in July 2017, PHE committed to update their evidence report on e-cigarettes and other novel nicotine delivery systems annually until the end of the Parliament in 2022.

**HC Deb 17 April 2018 | PQ 134903**

### [Smoking: Young People](#)

**Asked by: Viscount Ridley**

To ask Her Majesty's Government what lessons they have learnt from Norway's success in reducing its smoking rate among young women from 30 per cent to 1 per cent in the last 16 years.

**Answering member: Lord O'Shaughnessy | Department: Department of Health and Social Care**

The Government published its Tobacco Control Plan (TCP), *Towards a Smokefree Generation: A Tobacco Control Plan for England*, in July of 2017. In developing policy proposals for the plan it reviewed evidence on how other leading tobacco control countries have implemented policies to reduce tobacco use.

Smoking rates for women in England are currently at 13.7%, the lowest they have ever been. As outlined in the TCP there is a commitment to

reduce smoking among adults from 15.5% to 12% or less by 2022. A copy of the TCP is attached.

**HL Deb 09 April 2018 | PQ HL6708**

[Tobacco](#)

**Asked by: Davies, Philip**

To ask the Secretary of State for Health and Social Care, pursuant to the Answer of 22 December 2017 to Question 120096, on Tobacco, what informal or other communication his Department has had with those groups; and if he will make a statement.

**Answering member: Steve Brine | Department: Department of Health and Social Care**

The process for tendering for the grant scheme to support delivery of the new Tobacco Control Plan has yet to commence. Officials have informed representatives of Action on Smoking and Health on progress with this process, and have reminded them that any grant will be awarded on a competitive basis, in accordance with Cabinet Office guidelines. All interested applicants will need to follow the terms and conditions of the tender after the invitation for bids has been announced.

**HC Deb 23 January 2018 | PQ 122797**

[Smoking](#)

**Asked by: Morgan, Stephen**

To ask the Secretary of State for Health, how the Tobacco Control Plan for England will be funded.

**Answering member: Steve Brine | Department: Department of Health and Social Care**

Delivery of the Tobacco Control Plan for England will be funded through existing budgets. In addition, the Department plans to provide funding under Section 64 of the Health Services and Public Health Act 1968 to fund eligible organisation(s) to support implementation of the plan.

**HC Deb 10 January 2018 | PQ 121166**

## Written statement

[HCWS56](#)

### **Towards a Smokefree Generation - A Tobacco Control Plan for England**

*Steve Brine (Parliamentary Under-Secretary of State for Health):*

The Government has today published the Tobacco Control Plan for England, with a vision to create a smoke free generation. A copy is attached.

The 2017-2022 Tobacco Control Plan for England sets the overarching strategic direction for tobacco policy. The last tobacco control plan ran from 2011-2015. All the ambitions set in the previous plan were exceeded, during a period when the Government successfully introduced a significant amount of legislation, including standardised packaging of tobacco products and a ban on smoking in a car when a young person is present.

The new plan does not introduce new legislation. Instead, it shifts emphasis from action at the national level such as legislation to focused, local action, supporting smokers, particularly in disadvantaged groups, to quit.

The plan lays down bold ambitions for reducing smoking prevalence in England, en route towards creating a smoke free generation. These are:

- Reduce the prevalence of 15 year olds who regularly smoke from 8% to 3% or less by the end of 2022.
- Reduce smoking prevalence amongst adults in England from 15.5% to 12% or less by the end of 2022
- Reduce the inequality gap in smoking prevalence between those in routine and manual occupations and the general population by the end of 2022.
- Reduce the prevalence of smoking in pregnancy from 10.5% to 6% or less by the end of 2022.

## Commons debate

### [Tobacco Control Plan](#)

HC Deb 19 October 2017 | Volume 629 cc1028-

## 5. Useful links and further reading

Department of Health and Social Care *Towards a smoke-free generation: tobacco control plan for England* 18 July 2017

<https://www.gov.uk/government/publications/towards-a-smoke-free-generation-tobacco-control-plan-for-england>

Office for National Statistics *Adult smoking habits in the UK: 2017* 3 July 2018

<https://www.ons.gov.uk/releases/adultsmokinghabitsintheuk2017>

Department of Health and Social Care *Tobacco Control Plan: guidance on funding - Information on how organisations can apply for funding for work to support the Tobacco Control Plan* 10 May 2018

<https://www.gov.uk/government/publications/tobacco-control-plan-guidance-on-funding>

Department of Health and Social Care *Tobacco control plan: delivery plan 2017 to 2022 - Setting out actions for meeting the aims of the tobacco control plan for England and how progress will be monitored.* 7 June 2018

<https://www.gov.uk/government/publications/tobacco-control-plan-delivery-plan-2017-to-2022>

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