

Committee	Dated:
Health and Wellbeing Board	19 th June 2015
Subject: Tobacco Control Harm Reduction Update	Public
Report of: Commissioning and Performance Manager (Public Health)	For Decision

Summary

In March 2014 the City started a Harm Reduction pilot programme within stop smoking services, with the aim of getting more people engaged in stop smoking services and increasing the quit rates of those entering services. These programmes included a “cut down” programme, an extended 12 week stop smoking programme, and the use of electronic cigarettes in addition to traditional stop smoking services.

The pilot programmes in both level II and level III have now come to an end, and have seen mixed results. The results have now been reviewed by the City’s Tobacco Control Alliance and are presented to the Health and Wellbeing Board in this report. The area that has been most successful is the electronic cigarette pilot within level III stop smoking services, and the alliance recommends to Members that this part of the programme is continued.

Recommendation

Members are asked to:

- Approve the proposals at paragraph 19 to cease the level II pilot programmes until such time as the pharmacists are in a position to offer electronic cigarettes, and to continue the level III electronic cigarette programme alongside traditional stop smoking services.

Main Report

Background

1. Members will remember from the report to the Health and Wellbeing Board on the 18th July 2014, that in April 2014 the City of London Corporation held a harm reduction workshop involving the Director of Public Health, representatives from Public Health England, Action on Smoking and Health (ASH), Boots and Queen Mary University London, as well as representatives from the City and Hackney public health teams.
2. The aim of this workshop was to review the 2013 National Institute for Health and Care Excellence (NICE) Tobacco Harm Reduction Guidance and how it could apply to the City to increase the numbers of people cutting down and/or quitting smoking, as per Health and Wellbeing priorities.
3. The recommendations from the Director of Public Health following the workshop were to:

- a. Provide an extension to the current level II smoking cessation service for those finding it harder to quit, at pharmacists' discretion, for a longer service than the standard 12 weeks;
- b. Develop care pathways for a pilot harm reduction service to run from selected level II providers which can work with the current commissioned service, including a "cut down" service and the supervised use of electronic cigarettes;
- c. Work with the City's level III provider to pilot the supervised use of electronic cigarettes within the service;
- d. Perform further research regarding the use of electronic cigarettes and other harm reduction methods that are emerging.

Current Position

4. The pilot programmes in both level II and level III have now come to an end, and have seen mixed results.
5. Each of the pilot programmes within level II were completed within four Boots pharmacies across the City which receive a significant footfall of City workers and residents; Boots Moorgate, Boots Gracechurch Street, Boots Cheapside and Boots Fleet Street.

Extension to the current level II service

6. This service involved providing an extension to the traditional 12 week quit programme offered within level II services discretion. The aim was to keep those people who will go on to quit, but weren't quite ready, engaged in the service, using nicotine replacement therapy (NRT) and receiving behavioural support, for up to 12 additional weeks. This service was not advertised as it was felt that should all service users become aware of the option for an additional 12 week programme they may be de-motivated to quit within normal timescales. It was therefore only to be used when an advisor assessed that it was appropriate for that service user.
7. This pilot started in September 2014 for a period of six months within the four Boots pharmacies. During this time, two people were offered and took up the extended service, both of whom went on to quit smoking.
8. As a result of the numbers within this element of the harm reduction programme, the City's Tobacco Control Alliance has recommended that this element of the service be discontinued, as it is not bringing added value to the smoking cessation services.

Level II "cut down" service

9. This service involved a four week programme whereby smokers who did not feel ready to quit but who wanted to cut down their smoking, could enter the service and receive NRT and behavioural support. The aim of this was to entice more people in to the service, and once they had started cutting down to encourage them on to the quit programme.

10. The pilot started in September 2014 for a period of six months within the four Boots pharmacies. During this time, one person entered the cut down service and went on to quit smoking.
11. As a result of the numbers within this element of the harm reduction programme, the City's Tobacco Control Alliance has recommended that this element of the service be discontinued, as it is not bringing added value to the smoking cessation services.

Electronic cigarettes in level II

12. This element of the service involved giving service users an electronic cigarette starter pack alongside traditional NRT and behavioural support. The aim of this was to get more people in to the service, and to give behavioural support to those people who were trying to quit smoking using electronic cigarettes.
13. There were some issues with the advertising of this service as electronic cigarettes are not yet licensed medicinal products, and therefore could not be advertised as a product that would help people to quit smoking. In addition, due to the code of conduct that pharmacists are bound by electronic cigarettes could not be "offered" as a part of treatment, however should someone ask to have an electronic cigarette as part of their service, the service user was then provided with the electronic cigarette starter pack.
14. The pilot started in September 2014 for a period of six months within the four Boots pharmacies. During this time, eight people entered the service looking to use electronic cigarettes, and all eight went on to quit smoking.
15. While the quit rate of those using electronic cigarettes was encouraging, the numbers were very low. As such, the City's Tobacco Control Alliance has recommended that this element of the service be discontinued until electronic cigarettes are licensed as medicines, at which point the pharmacies will be able to play a far more active role in recommendations and usage of electronic cigarettes. This will be revisited once there are any developments with electronic cigarettes being licensed as medicines.

Electronic cigarettes in level III

16. This element involved giving service users an electronic cigarette starter pack and refills for a period of four weeks once they had set a quit date. Service users were then able to keep the electronic cigarette after that initial period and purchase their own refills. This service was provided in addition to the standard treatment of NRT or Champix, and behavioural support.
17. The pilot started in March 2014 for a period of a year. During this time, 92 smokers who accessed the service were offered an electronic cigarette, and 69 (75%) accepted the offer. Of those who accepted the offer, 45 (65%) were abstinent from cigarettes at four weeks, and two have not reached the four week time point yet. 18 (26%) of those given electronic cigarettes did not attend any further sessions and their smoking status and experience with electronic cigarettes could not be established. It is possible that they attended just to receive the electronic cigarette, as the service was heavily advertising the availability of electronic cigarettes.

18. Due to the high numbers and success of the pilot programme, the City's Tobacco Control Alliance has recommended that this pilot programme be continued, at least until the newly commissioned Integrated Substance Misuse and Tobacco Control service starts in October 2015, at which time the methods and models of delivery will be discussed with the new provider.

Proposals

19. Members are asked to approve the proposals to cease the level II pilot programmes until such time as the pharmacists are in a position to offer electronic cigarettes, and to continue the level III electronic cigarette programme alongside traditional stop smoking services.

Corporate & Strategic Implications

20. The proposals within this report support the following strategic aims from the Department of Community and Children's Services Business Plan:
 - a. Priority Two – Health and wellbeing: Promoting the health and wellbeing of all City residents and workers and improving access to health services in the square mile.
 - b. Priority Five – Efficiency and effectiveness: Delivering value for money and outstanding services

Implications

21. Electronic cigarettes are currently cheaper than providing NRT - for comparison within the pilot electronic cigarettes had a cost of £28 per client, compared with the cost of NRT, which is about £90 per client with single NRT. Stop smoking services typically use two types of NRT concurrently. The cost of Champix is over £160 per client.

Appendices

- None

Background Papers:

Service Review of Drug, Alcohol and Tobacco Control Services – 18th July 2014

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