



Investing to reduce tobacco usage and tackle associated health inequalities

Introduction

Smoking is a major cause of preventable ill health and early death in England and a driver of stark inequalities in life expectancy. The costs attributed to smoking are also significant. In 2019/20, 506,100 hospital admissions were attributable to smoking¹ and it is estimated that smoking-related costs for the NHS total £2.6 billion every year². Taking a wider system view of health and care, it is estimated that the additional costs to the social care system due to smoking-related illness is £1.2 billion per annum, equivalent to 8% of all local authority spending on home and residential social care support for adults in England³.

The *NHS long term plan*⁴ recognised smoking as one of five areas that required targeted intervention to support health improvements, and allocated funding to develop the work. It set out the intention that, by 2023/24, all people admitted to hospital who smoke will be offered NHS-funded tobacco treatment services. Since the publication of the *NHS long term plan*, further initiatives have expanded this support to enable people to continue to receive help after discharge from hospital, through community pharmacies.

This short briefing brings together the key messages from the policies and guidance that support work to reduce tobacco usage in England. It also identifies the funding streams in place to enable the work to be undertaken.



¹ NHS Digital, *Statistics on smoking, England 2020*, December 2020

² Public Health England, *Cost of smoking to the NHS in England: 2015*, July 2017

³ Action on Smoking and Health, *The cost of smoking to the social care system*, March 2021

⁴ NHS, *The NHS long term plan*, January 2019

Policy context

In 2017, the Department of Health and Social Care (DHSC) published *Towards a smoke-free generation: a tobacco control plan for England*⁵. This document sets out the vision to reduce smoking prevalence to below 5% of the population through supporting people not to start smoking; helping people to quit; and addressing two main areas of smoking in pregnancy and a focus on reducing smoking for those with mental health conditions.

The *NHS long term plan* included three areas where the NHS would actively work towards this vision: by 2023/24, all people admitted to hospital who smoke would be offered NHS-funded tobacco treatment services; a new smoke-free pregnancy pathway would be established; and a new universal smoking cessation offer would be available for long term users of specialist mental health and learning disability services. These intentions were supported by funding for the phased implementation of the programmes, to complement local authorities' roles in smoking cessation. The *2022/23 priorities and operational planning guidance*⁶ maintained this focus with an expectation that system allocations will be used to 'support the rollout of tobacco dependence treatment services in all inpatient and maternity settings, in line with agreed trajectories and utilising £42 million of SDF funding.' From March 2022, all pharmacies in England were able to offer stop smoking support to patients when they were discharged from hospital, giving a continuity of support for up to 12 weeks post discharge⁷.

The recently published *2023/24 priorities and operational planning guidance*⁶ stated that, as part of embedding measures to improve health and reduce inequalities, local systems are expected to continue to focus on smoking cessation among other areas of concern.

In June 2022, the Office for Health Improvement and Disparities published *The Khan review: making smoking obsolete*⁸. The review found that, without further action, 'England will miss the smokefree 2030 target by at least 7 years, and the poorest areas in society will not meet it until 2044.' The review made four recommendations:

- increase investment by an additional £125 million per year, of which £70 million should be ring fenced for stop smoking services
- increase the age of sale from 18 by one year, every year
- promote vaping as an effective tool to help people quit smoking tobacco
- improve prevention in the NHS, to deliver on the *NHS long term plan* commitments by offering smokers advice and support to quit at every interaction with health services.

Dr Khan also recommended that further research should be undertaken on smoking related health disparities, particularly linked to ethnic disparities and young people.

⁵ Department of Health and Social Care, *Towards a smoke-free generation: a tobacco control plan for England*, July 2017

⁶ NHS, *2022/23 priorities and operational planning guidance*, December 2021

⁷ NHS, *High street pharmacies help people stub out smoking*, March 2022

⁸ Office for Health Improvement and Disparities, *The Khan review: making smoking obsolete*, June 2022

Funding sources

Smoking cessation services have gone through a period of pilot programmes and initiatives supported by short term, non-recurrent funding. The *NHS long term plan implementation framework*⁹ set out a number of funding streams to support work to address tobacco addiction:

- targeted investment to develop NHS-funded smoking cessation services in selected sites in 2020/21
- additional indicative allocations for all local systems, from 2021/22, for the phased implementation of NHS smoking cessation services for all inpatients who smoke, pregnant women and users of high-risk outpatient services (as a complement not a substitute for local authority's own responsibility to fund smoking cessation).

The *2023/24 priorities and operational planning guidance* sets out that the funding to support these services is now included in integrated care board (ICB) baselines:

'Funding is provided through core ICB allocations to support the delivery of system plans developed with public health, local authority, VCSE and other partners. The formula includes an adjustment to weight resources to areas with higher avoidable mortality and the £200m of additional funding allocated for health inequalities in 2022/23 is also being made recurrent in 2023/24.'

Case study examples

A number of early implementers and pilot sites have been established since the publication of the *NHS long term plan*. These projects are beginning to share data and information around the effectiveness of the work, which can support other organisations to build their own service models. This section includes some high level examples with links to find out more.

Transfer of care from hospital to community pharmacy pilot¹⁰

The Royal Oldham Hospital, part of Northern Care Alliance NHS Foundation Trust, started to refer patients to community pharmacies in December 2020. These patients had given up smoking during their inpatient stay, which the community pharmacy service could then support them to maintain.

57% of patients referred had quit at 4 weeks, of which 37% still recorded a quit at 12 weeks.

QUIT programme¹¹

The QUIT programme was developed in 2019 in the South Yorkshire and Bassetlaw integrated care system (ICS). It was rolled out across all eight trusts within the system – four acute, 3 mental health and one specialist children's hospital. The aim of the programme was to embed treatment for tobacco addiction into the routine care of every patient who smokes when they attend hospital. The project was developed in partnership with Yorkshire Cancer Research.

The QUIT programme is also supporting parents of child patients, outpatients, community mental health patients, and staff.

Help for staff to stop smoking¹²

A regional project in the north east of England gave staff access to free nicotine replacement therapy (NRT) products, or a refillable e-cigarette package over a period of 12 weeks. Over 200 people signed up to the programme when it was launched in early 2022, to support NHS staff to be healthier and address sickness absence due to smoking related illness.

⁹ NHS, *NHS long term plan implementation framework*, June 2019

¹⁰ NHS England, *Case study: smoking cessation transfer of care from hospital to community pharmacy pilot – Oldham in Greater Manchester*, accessed December 2022

¹¹ Respiratory Futures, *LTP tobacco dependency early implementers: the South Yorkshire and Bassetlaw (SYB) integrated care system*, February 2022

¹² Gateshead Health NHS Foundation Trust, *Over 200 NHS staff sign up to the QE's regional pilot to help staff stop smoking*, March 2022

Role of the NHS finance function

As set out earlier in this briefing, in 2019/20, 506,100 hospital admissions were attributable to smoking and it is estimated that smoking-related costs for the NHS total £2.6 billion every year. As a finance function charged with ensuring the financial sustainability of the NHS and its individual organisations, these statistics alone show why it is imperative that funding is used effectively to address tobacco addiction.

Amid the many demands on limited financial resources, it is easy to miss relatively small allocations for specific policy areas such as smoking cessation. However, the funding for these services is now within the overall ICB baseline allocation to enable all systems to address this important area of health inequality in their own populations

The NHS finance function has a key role in ensuring that the allocation is used for the purpose for which it is intended and that their wider organisation is aware of the opportunity to progress an essential step towards tackling local health inequalities.

About the HFMA

The Healthcare Financial Management Association (HFMA) is the professional body for finance staff in healthcare. For over 70 years, it has provided independent and objective advice to its members and the wider healthcare community. It is a charitable organisation that promotes best practice and innovation in financial management and governance across the UK health economy through its local and national networks.

The association also analyses and responds to national policy and aims to exert influence in shaping the wider healthcare agenda. It has particular interest in promoting the highest professional standards in financial management and governance and is keen to work with other organisations to promote approaches that really are 'fit for purpose' and effective.

The HFMA offers a range of qualifications in healthcare business and finance at undergraduate and postgraduate level and can provide a route to an MBA in healthcare finance. The qualifications are delivered through HFMA's Academy which was launched in 2017 and has already established strong learner and alumni networks.

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