

Budget Proposals 2019/20: Smoking Cessation Service (Smokefeellife)

Consultation Summary Report

Why we consulted?

Over the last nine years we've had to make savings of £60 million as our central government funding, the Revenue Support Grant (RSG), has reduced and the need for social care support has increased. We've done this by becoming more efficient at what we do, by reducing some of our administrative functions and increasing our income. Throughout this period we have done our best to protect your services.

Six years ago, the RSG was worth £24 million to the council and was reduced to just £100,000 last year. In 2019/20 there will be no grant and our costs will exceed our income. As a result, we'll need to find a further £7 million in savings or income generation. Much of this will come from becoming a more efficient council, however, 14 proposals, amounting to approximately £300,000, have been identified from services that will impact the public.

It was these proposals that made up the Budget Proposals 2019/20 consultation.

Approach

We published all the public facing proposals on our website on 12 November 2018 with feedback requested by midnight on 23 December 2018.

Respondents were directed to a central index pageⁱ, which outlined the overall background to the exercise, and provided links to each of the individual proposals on our Consultation Portalⁱⁱ.

Each individual page included further details on the specifics of what the proposal contained and what we thought the impact might be, along with any other elements we'd taken into account. Feedback was then invited through an online form and a dedicated email address. Hard copies of the proposal documents and surveys were also made available on request.

As well as publishing the consultations on our website, we also emailed members of the West Berkshire Community Panel (around 400 people), , notifying them of the exercise and inviting their contributions. Heads of Service also made direct contact with those organisations directly affected prior to them being made publicly available.

Finally, we issued a press release on the 12 November 2018, and further publicised our consultations through our Facebook and Twitter accounts. We also placed posters in our main offices and other council properties e.g. libraries, leisure centres and family hubs, and made them available to WBC Councillors and Parish and Town Councils to put up in the wards/parishes.

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Proposal Background

Smoking is the main cause of preventative illness, such as cancer, and premature death in England.ⁱⁱⁱ It is also the largest cause of differences in death rates between the rich and the poor, with further research showing that certain occupations and educational levels, and disadvantaged social groups are two to three more times likely to die from smoking than those better off.

The proportion of adults that smoke in West Berkshire has dropped from 18.1% (21,550 adults) in 2012 to 13.1% (15,992 adults) in 2017.

The Smoking Cessation Service provide a range of support, including:

- One-to-one or group sessions over 12 weeks.
- A free weekly supply of Nicotine Replacement Therapy (NRT).
- Drop-in clinics in local community settings, GP surgeries, supermarkets and other venues.
- A selection of clinics operating by appointment only.
- Support via Quitline, text or Face-to-Face video chat.
- Home visits for people with mobility problems.

We currently provide Smokefreelife^{iv} with annual funding of £201,100. 764 people used the service in 2017/18

Legislation Requirements

There is no legislative requirement to provide this service.

Proposal Details

To reduce the annual funding to Smokefreelife from £201,100 to £101,100 (a proposed saving of £100,000 or 50%) from 1 April 2019.

Consultation Response

Number of Responses

In total 25 responses were received, although one respondent didn't complete the questionnaire.

One respondent identified themselves as a user of the service, 21 as residents, two as employees of West Berkshire Council, three as Parish/Town Councillors, two as partner organisations and one as other.

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Summary of Main Points

Of the 24 completed responses, 15 either strongly agreed or agreed with the proposal, whilst seven either strongly disagreed or disagreed.

Respondents who disagreed or strongly disagreed with the proposal cited their main objection as the cost impact to other health services and the impact of smoking on ill health. They highlighted that prevention is one of the main priorities in the NHS Five Year Forward View and the West Berkshire Health and Well Being Strategy.

Respondents agreed that the services should be more targeted to work with those at greater risk of ill health e.g. pregnant women, manual workers and those from less affluent areas. However, it was felt by some respondents, that the savings would hit the most vulnerable who are unable to pay for services for themselves.

Respondents who agreed with the proposal felt that the service should be reduced or ceased all together, and that there are a number of national campaigns and awareness schemes that highlight the dangers of smoking. Those who wish to stop smoking have other options available to them, such as vaping.

Summary of Responses by Question

1. Are you...?

(N.B. respondents were able to tick more than one option)

	Responses		Percent of Cases
	N	Percent	
Or anyone you care for, a user of this service	1	3.3%	4.0%
A resident of West Berkshire	21	70.0%	84.0%
Employed by West Berkshire Council	2	6.7%	8.0%
A Parish/Town Councillor	3	10.0%	12.0%
A District Councillor	0	.0%	.0%
A service provider	0	.0%	.0%
A partner organisation	2	6.7%	8.0%
Other	1	3.3%	4.0%

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2. **How far do you agree with the proposal to reduce the annual funding to Smokefeelfe from £201,100 to £101,000 from 1 April 2019?**

	Frequency	Percent	Valid Percent
Strongly agree	14	56.0	58.3
Agree	1	4.0	4.2
Neither agree nor disagree	2	8.0	8.3
Disagree	1	4.0	4.2
Strongly disagree	6	24.0	25.0
Total	24	96.0	100.0
Not answered	1	4.0	
Total	25	100.0	

3. **What do you think we should be aware of in terms of how this proposal might impact people? For example, do you think it will affect particular individuals more than others?**

One respondent felt that persons with limited mobility may be disadvantaged in accessing support and information.

Another felt that it would affect those people who have made bad choices in their life.

Most respondents did not give a response or felt that it would have little impact

4. **If the decision is taken to proceed with this proposal, do you have any suggestions for how we can reduce the impact on those affected? If so, please provide details.**

A number of ideas were put forward to mitigate the impact of the proposed cuts:

- Make a charitable appeal to those that can afford to pay more
- Pay more council tax
- Signpost to other service providers, such as GPs
- Seek to recover full cost of materials provided to individuals in receipt of support.
- Develop a digital offer to provide ongoing assistance at a lower cost which links to bodies offering ongoing support that are not reliant on council budgets.

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5. Do you have any suggestions on how we might save money or increase income, either in this service, or elsewhere in the council? If so, please provide details.

A number of ideas were put forward which included:

- Increasing council tax through initiating a referendum.
- Lobby central government and inform them of the harm being done by their cuts. It could also lobby, directly and through the LGA, for a fairer, more sustainable and more decentralised system for funding local government, which increased the extent of local control.
- Reduce longer term costs and demand on services through investment in prevention.
- Consider social costs more broadly and work more effectively with other bodies, including health, criminal justice etc. to pool resources and invest for longer term benefit, particularly in prevention.
- Develop a digital offer that supports people to give-up at a lower cost
- Volunteers running classes at public spaces like the library, is another way to retain face to face help but at no cost to the council.
- Better planning with real life impact considered

6. If you, your community group, or organisation think you might be able to help reduce the impact of this proposal, if the decision is taken to proceed with it, please provide your name and email address below.

Two respondents provided their contact details.

7. Any further comments?

None that had not been raised in earlier comments.

Officer conclusion and recommendation can be found in the associated Overview of Responses and Recommendations document.

Denise Sayles
Senior Programme Officer
Public Health and Wellbeing Team
09/01/2019

Please note: *In order to allow everyone who wished the opportunity to contribute, feedback was not sampled. Therefore this wasn't a quantitative, statistically valid exercise. It was neither the premise, purpose, nor within the capability of the exercise, to determine the overall community's level of support, or views on the proposals, with any degree of confidence.*

The feedback captured therefore should be seen in the context of 'those who responded', rather than reflective of the wider community.

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All the responses have been provided verbatim as an appendix to this report. Whilst this summary seeks to distil the key, substantive points made, it should also be read in conjunction with the more detailed verbatim comments to ensure a full, rounded perspective of the views and comments are considered.

ⁱ <http://www.westberks.gov.uk/budgetproposals>

ⁱⁱ <http://info.westberks.gov.uk/consultations>

ⁱⁱⁱ https://www.cancerresearchuk.org/about-cancer/causes-of-cancer/smoking-and-cancer/smoking-facts-and-evidence#smoking_facts0

^{iv} <https://www.smokefreelifeberkshire.com/>

Overview of Responses and Recommendations

Budget Proposals 2019/20: Smoking Cessation Service (Smokefreelife)			Head of Service: Matt Pearce Author: Denise Sayles		14 February 2019 Version 1 (Executive)
Proposal:	To reduce the annual funding to Smokefreelife from £201,100 to £101,100 from 1 April 2019.				
Total budget 2018/19:	£201,100	Initial proposed saving 2019/20	£100,000 (50%)	Recommended saving 2019/20	£100,000 (50%)
No. of responses:	In total, 25 responses were received. Of those that responded: <ul style="list-style-type: none">• One identified themselves as user of the service• 21 as residents of West Berkshire• Two as council employees• Three as Parish/Town Councils• 0 as District Councillors• 0 as service providers• Two as partner organisations• One as other				
Key issues raised:	<p>Of the 24 completed responses, 15 either strongly agreed or agreed with the proposal, whilst seven either strongly disagreed or disagreed.</p> <p>Respondents who disagreed or strongly disagreed with the proposal cited their main objection as the cost impact to other health services and the impact of smoking on ill health.</p> <p>Respondents agreed that the services should be more targeted to work with those at greater risk of ill health e.g. pregnant women, manual workers and those from less affluent areas. However, it was felt by some respondents, that the savings would hit those most vulnerable and unable to pay for services for themselves.</p> <p>Respondents who agreed with the proposal felt that the service should be reduced or ceased all together, and that there are a number of national campaigns and awareness schemes that highlight the dangers of smoking. Those who wish to stop smoking have other options available to them, such as vaping.</p>				
Equality issues:	No issues were raised during the consultation, that weren't already included in the stage one Equality Impact Assessment.				

NB: This Overview of Responses and Recommendations paper should be read in conjunction with the Consultation Summary Report and Verbatim Responses received in relation to this proposal. These can be found in the agenda pack or on our [Consultation Portal](#).

Overview of Responses and Recommendations

Suggestions for reducing the impact on service users:	Suggestion	Council response
	Signpost to other service providers such as GPs	Whilst GP's and primary care provide advice and signposting, they do not currently provide a stop smoking service. NHS choices provides a range of information to help people give up and the council will continue to promote this online resource.
	Develop a digital offer to provide ongoing assistance at a lower cost which links to bodies offering ongoing support that are not reliant on council budgets	The council is currently reviewing the existing commissioned health improvement services, with a view to develop a new model from April 2020. As part of this review the council will be exploring whether a digital platform, which would provide advice and support to help people make positive lifestyle changes across a range of behaviours, can form part of this new offer
Suggestions for saving money or increasing income:	Suggestion	Council response
	Seek to recover full cost of materials provided to individuals in receipt of support.	Given that the saving proposed against this service will significantly reduce the financial envelope for this service, it will mean that the service will need to become more targeted and support those with the highest need in our communities. It is likely that these individuals would be unable to fund the service themselves.
	Increasing council tax through initiating a referendum.	The raising of Council Tax will be one of the options that Members will consider as part of setting a balanced budget for 2019/20.
	Lobby central government and inform them of the harm being done by their cuts	The council continues to lobby central government to reverse cuts to the public health grant.
	Reduce longer term costs by reducing demand on services through investment in prevention	The council will continue to work with wider partners to address the local needs of the population. This includes working with the local integrated care system.
	Work more effectively with other bodies, including health, criminal justice etc. to pool resources and invest for longer term benefit,	The council will continue to work with a range of partners (including the NHS, police and voluntary sector) to support the health and wellbeing of our residents. This is mainly achieved through the Health and Wellbeing Board which bring together the NHS, public health, adult social care and children's services, including elected

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Overview of Responses and Recommendations

	particularly in prevention.	representatives and Local Healthwatch, to plan how best to meet the needs of our local population and tackle inequalities in health
Conclusion and recommendation:	<p>Whilst smoking is one of the leading causes of premature death and health inequalities in West Berkshire, we have seen a dramatic fall in smoking rates over the last five years with fewer individuals seeking support. However, it is often the most vulnerable in our society who need greater support to help them reduce the harm caused by tobacco.</p> <p>There is nothing in the responses to the consultation relating to this savings proposal which would prevent the council from proceeding.</p> <p>It is recommended that the proposal is progressed.</p>	

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Stage One Equality Impact Assessment (EqIA 1)

What is the proposed decision?	To reduce annual funding the Smokefreelife service from £201,100 to £101,100 (a proposed saving of £100,000 or 50%) from 1 April 2019.
Summary of relevant legislation	
Does the proposed decision conflict with any of the council's key strategic priorities?	No
Name of budget holder	Matthew Pearce
Name of Service and Directorate	Public Health and Wellbeing Service
Name of assessor	Denise Sayles
Date of assessment	29/10/2018
Version and release date (if applicable)	V2. 14/01/2019

Is this a...?		Is this policy, strategy, function or service...?	
Policy	No	New or proposed	No
Strategy	No	Existing and being reviewed	Yes
Function	No	Changing	No
Service	Yes		

1. What are the main aims, objectives and intended outcomes of the proposed decision and who is likely to benefit from it?	
Aims:	To reduce spending in line with ring fenced grant reductions and council savings.
Objectives:	To reduce spending in line with ring fenced grant reductions and council savings.
Outcomes:	Reduction in costs of smoking cessation services
Benefits:	Saving of £100,000

2. Which groups may be affected and how? Is it positively or negatively and what sources of information have been used to determine this?		
Group affected	What might be the effect?	Information to support this
Age	16+	Access to this service is reduced
Disability	Service may be less flexible in provision	Reduction in service provision reduces flexibility of services particularly outreach services
Gender reassignment	There is no evidence to indicate that there will be a greater impact on this group than on any other	
Marriage and civil partnership	There is no evidence to indicate that there will be a greater impact on this group than on any other	
Pregnancy and maternity	None identified	Will be in the targeted group
Race	There is no evidence to indicate that there will be a greater impact on this group than on any other	
Religion or belief	There is no evidence to indicate that there will be a greater impact on this group than on any other	
Sex	There is no evidence to indicate that there will be a greater impact on this group than on any other	
Sexual orientation	There is no evidence to indicate that there will be a greater impact on this group than on any other	
Further comments		

3. Result	
Are there any aspects of the proposed decision, including how it is delivered or accessed, that could contribute to inequality?	No
Will the proposed decision have an adverse impact upon the lives of people, including employees and service users?	No
<p>Those who unable to access the service will still have an option to purchase nicotine replacement treatments and will be able to access other NHS smoking resources. The service redesign will focus on those in under-represented groups and with higher levels of deprivation. We expect that this will have a relatively small impact on those accessing the services.</p>	

4. Next steps	
EqlA 2 required?	No
Owner of EqlA 2	
Timescale for EqlA 2	



Number of responses: 25 (including 1 incomplete)

ID	How far do you agree with the proposal to reduce the annual funding to Smokefreelife from £201,100 to £101,100 from 1 April 2019?		What do you think we should be aware of in terms of how this proposal might impact people? For example, do you think it will affect particular individuals more than others?	If the decision is taken to proceed with this proposal, do you have any suggestions for how we can reduce the impact on those affected? If so, please provide details.	Do you have any suggestions on how we might save money or increase income, either in this service, or elsewhere in the council? If so, please provide details.	Any further comments?
	Response	Please tell us the reasons for your response.				
1	Disagree	<p>We acknowledge that the Council is in a challenging financial situation and will therefore need to reduce its expenditure. We do however have some concerns about the areas highlighted below, particularly because prevention is one of the main priorities in the NHS Five Year Forward View and the West Berkshire Health and Well Being Strategy. We would also like to continue to explore how we can work together through the Berkshire West 10 to maximise economics of scale across our area. These are the areas of concern and questions we wanted to highlight: We agree that the current service should be reviewed to offer a more targeted approach that supports individuals at greater risk of ill health, e.g. pregnant women, individuals from less affluent areas & manual workers. However, any reduction in funding to the service is of concern in that illness and disability linked to smoking continues to place a huge burden on the UK health service in the region of £5bn per year. Spending on cardiovascular disease caused by smoking cost £205.8m, while almost one in five deaths in the UK could be attributed to smoking (27.2% of male deaths and 10.5% of female deaths).</p>				

ID	How far do you agree with the proposal to reduce the annual funding to Smokefreelife from £201,100 to £101,100 from 1 April 2019?		What do you think we should be aware of in terms of how this proposal might impact people? For example, do you think it will affect particular individuals more than others?	If the decision is taken to proceed with this proposal, do you have any suggestions for how we can reduce the impact on those affected? If so, please provide details.	Do you have any suggestions on how we might save money or increase income, either in this service, or elsewhere in the council? If so, please provide details.	Any further comments?
	Response	Please tell us the reasons for your response.				
2	Strongly disagree	Smoking is one of the most significant causes of ill health so cutting this service by 50% seems to have wilful disregard for the harm it will cause. As well as the long term impact on the individuals affected, it will increase costs to other, principally health, services. The supporting information says that stop smoking services have played a small role in the decline of smoking, but doesn't give any indication of how much. It is presumably not nothing, or the whole service would be decommissioned. It is considered helpful in stopping people (e.g. pregnant women) from smoking. So cutting the service will harm those people who no longer receive it. How much harm will it do? What extra costs will it create. Without that information, how can the Council make a rational decision on this matter?			I do not have sufficient information about the workings of the rest of the council to be able to suggest any better area for cuts. More general options for increasing income would be to increase council tax, holding a referendum, as required by central government, if necessary. The council might also wish to lobby central government and inform them of the harm being done by their cuts. It could also lobby, directly and through the LGA, for a fairer, more sustainable and more decentralised system for funding local government, which increased the extent of local control. One way of reducing costs longer term would be by reducing demand on services through investment in prevention, which is the opposite of what these cuts are doing. The council should be considered social costs more broadly and working more effectively with other bodies, including health, criminal justice etc. to pool resources and invest for longer term benefit, particularly in prevention.	
3	Strongly disagree	It should be reduced to zero! There is no legislation requiring WBC to provide this, people decided to smoke from their own free-will and should pick up the bill themselves. Take the input from £200k to £0 and redeploy that £100k elsewhere.	If people decided to smoke then the consequences is of their choice. It should not be for the many to pay for the few's poor decisions. Less people smoke than those that do.		Better planning with real-life impact considered. The green bin saga was just a joke and no way is it saving money!	No
4	Strongly agree	Smoking is a personal choice. There is ample evidence freely available about the long term consequences of smoking and it should not be a part of the Council's budget funding in times when cuts are being made in other services.				
5	Strongly agree	I think that generally people ignore advice on the dangers of smoking, so the money could be better spent on other services where people will actually benefit from the spend.	I don't think smokers will notice the difference.	I don't think this is an effective service, so there will be little impact.		
6	Strongly agree	I would reduce this to zero	nothing	I don't believe there is any impact		
7	Strongly agree					

ID	How far do you agree with the proposal to reduce the annual funding to Smokefreelife from £201,100 to £101,100 from 1 April 2019?		What do you think we should be aware of in terms of how this proposal might impact people? For example, do you think it will affect particular individuals more than others?	If the decision is taken to proceed with this proposal, do you have any suggestions for how we can reduce the impact on those affected? If so, please provide details.	Do you have any suggestions on how we might save money or increase income, either in this service, or elsewhere in the council? If so, please provide details.	Any further comments?
	Response	Please tell us the reasons for your response.				
8	Strongly disagree	You have already made huge and sustained cuts to many support services over the last few years which in many cases have hit the needy the hardest. It's time to stop this, and to focus limited funds on those who need them most. I cannot support any of the above cuts and urge you to find savings elsewhere or re-allocate funds from areas that will not impact the disadvantaged.				
9	Strongly disagree	Should be available to all, in order to reduce the nhs burden. The nhs is an invaluable service and needs to be supported by these initiatives in order to keep nhs funding targeted at those most in need		Make a charitable appeal to those that can afford to pay more should pay more council tax	Make a charitable appeal to those that can afford to pay more should pay more council tax	
10	Strongly agree	There are other service providers who can provide this service.		Signpost people to other service providers, such as GP's		
11	Strongly agree	Each week I see the mobile unit both in Newbury and in West Reading. In the past three years I have watched it with growing suspicion as I have never seen any member of the public approach the team. In view of the financial cuts being made by the council over the past year, I would advocate cutting the expenditure on this service by 100%.	I doubt if anyone will notice if it disappears	I'm sure smokers will find alternative ways if they wish to give up.	Only what I hav said earlier in my submission.	No
12	Strongly agree	This is a significant amount of money to allocate to residents who CHOOSE not to lead a smoke-free-life. I would consider that this service should be cut altogether as it is a lifestyle choice.	Yes, those who have made bad long term choices in their lives.			This saving should go ahead as it is an avoidable lifestyle choice and there is plenty of information available on this subject. I would question why this service receives Council funding at all.
13	Agree	I do feel less inclined to offer support to services where people have the ability to help themselves and/or there is considerable information is already available to them in the public domain.				
14	Strongly agree					
15	Strongly agree					
16	Strongly disagree	I believe the budget should be reduced to Zero. There any sufficient awareness schemes regarding smoking with the government highlighting the dangers, tax increases and now the rise of vaping which has been recognised as a conduit to giving up smoking. This money saved could be used to better effect.	No	See earlier comment	See earlier comment	
18	Neither agree nor disagree					

ID	How far do you agree with the proposal to reduce the annual funding to Smokefree life from £201,100 to £101,100 from 1 April 2019?		What do you think we should be aware of in terms of how this proposal might impact people? For example, do you think it will affect particular individuals more than others?	If the decision is taken to proceed with this proposal, do you have any suggestions for how we can reduce the impact on those affected? If so, please provide details.	Do you have any suggestions on how we might save money or increase income, either in this service, or elsewhere in the council? If so, please provide details.	Any further comments?
	Response	Please tell us the reasons for your response.				
19	Strongly agree		Persons with limited mobility may be disadvantaged in accessing support and information.	Seek to recover full cost of materials provided to individuals in receipt to support	See previous comment	
20	Strongly agree	However as there are national campaigns related to no smoking I see no extra benefit for WestBerkshire to have a Smoking Cessation service at all. This would save another 101K and by far the easiest way to reach your target without effecting other more important services	I see no impact on any group that is not either able to self help or that have more pressing concerns that cessation of smoking. .	Digital content is the best way to provide ongoing assistance at very low cost. I would be investing any remaining budget west berks wants to assign into digital help and links to bodies offering ongoing support that are not reliant on Council budgets	Digital is how most people access information and so a focus on this is the best way to offer the same levels of information at lower cost. Volunteers running classes at public spaces like the library is another way to retain face to face help but at no cost to the council.	NONE
21	Neither agree nor disagree					
22	Strongly agree					
23	Strongly agree	I think that the service should be cut completely. I do not think it should be funded by council tax and by the council. It is a matter for people and their doctors. They shouldn't have started smoking in the first place and should pay for nicotine replacement therapy themselves if they need it.	no		remove the service completely, savemore	
24	Strongly agree					
25	Strongly disagree	Remove funding entirely - there are plenty of other options available that don't need to cost the council anything.	The other options available			