



Smoking Still Kills

Introduction

Smoking is still the biggest preventable cause of death in England, accounting for more than 80,000 premature deaths each year and around 700 per year in Warwickshire. Tobacco use is one of the most significant causes of health inequalities and one of our most significant public health challenges. About 18.4% of adults in England and 14.5% in Warwickshire smoke, although rates are much higher in some areas.

The five-year strategy set out in the Government's Tobacco Control Plan for England 'Healthy Lives, Healthy People' ends in 2015. Smoking Still Kills proposes new targets for a renewed national strategy to accelerate the decline in smoking prevalence over the next decade. The report sets out short-term objectives and longer term aims and develops the agenda for tobacco control launched in 2008 with Beyond Smoking Kills. The recommendations were developed by an editorial board in consultation with an advisory board of academics and experts, and feedback from four regional events with local and national tobacco control professionals. Warwickshire was part of the influencing process and contributed to two regional events.

Although it is up to government to take a lead and set a new course for tobacco control over the next five years, the achievement of the vision will require the full participation of stakeholders across society including local authorities, the NHS, regional offices of tobacco control and civil society. The long-term goal of bringing smoking prevalence down to below 5 per cent in all socio-economic groups by 2035, and the medium-term targets that this translates into, will only be achieved through a genuinely comprehensive and collaborative approach.

The following '**Actions**' are the suggested response of Warwickshire to the national '**Recommendations**' (with explanatory notes in some cases). Additional actions have been identified for Warwickshire which are not associated with the national recommendations.

The Smokefree Warwickshire Alliance was established to oversee and advise on the strategic direction of Tobacco Control across Warwickshire and to monitor and review progress of the Smokefree Warwickshire project areas identified within the action plan.

Steering Group members come from key organisations including Warwickshire Stop Smoking Service, WCAVA, Warwickshire Trading Standards, Borough and District Council Environmental Health, Clinical Commissioning Groups, HMRC, Education, Children, Young People and Family Services, Warwickshire Fire and Rescue, Warwickshire Communications and Secondary Care.

Rag Rating

RED	Action needs to be done before the next meeting
AMBER	Action needs to be achieved by end of financial year
GREEN	Action completed
YELLOW	Action ongoing

Actions which have no local activity will be shaded in Grey on the Plan

KEY (As at December 2015)

CCG - Clinical Commissioning Group (s)

CEnTSA - Central England Trading Standards Authorities

COMPASS - Young Persons Drug and Alcohol Treatment

CRC - Community Rehabilitation Company

CWPT - Coventry and Warwickshire Partnership Trust

EHO - Environmental Health Officers (D&B)

GEH - George Eliot Hospital

H&WBB - Health and Wellbeing Board

HMRC - HM Revenue and Customs

MECC - Making Every Contact Count

NHS - Whole of NHS Estate (incl acute and primary care)

PHE - Public Health England

SATOD – Smoking at time of delivery

SFW - Smoke Free Warwickshire Alliance/Partnership

SSIPS - Stop Smoking in Pregnancy Service

SWFT - South Warwickshire Foundation Trust

TCCC - Tobacco Control Collaborating Centre

TCL - Tobacco Control Lead (Sue Wild supported by Paul Hooper)

TRP - The Recovery Partnership (Adult Drug and Alcohol Treatment Service)

TSO - Trading Standards Officers (WCC)

UHCW - University Hospital Coventry and Warwickshire

WCC - Warwickshire County Council

WMTCN - West Midlands Tobacco Control Network

WSSS - Warwickshire Stop Smoking Services (Commissioned by WCC)

WHO FCTC - World Health Organisation Framework Convention on Tobacco Control

Section 1 Strategy and Data

Recommendation	Action	Who (Lead in bold)	Timescales (by)	Measure/Outcomes	RAG rating	Updates (6 months)
1.1 Publish a new comprehensive tobacco control plan for England with a commitment to tackling inequalities at its heart.	SFW to review action plan against government plans when published.	TCL , SFW	TBC	Updated plan		
1.2 Define a long-term vision to end the smoking epidemic: reducing adult smoking prevalence to less than 5% in all socio-economic groups by 2035.	SFW to agree vision for Warwickshire (with clarity re e-cigarette use) and seek endorsement by H&WBB	TCL , SFW	March 2016	Agreed action plan for Warwickshire endorsed by H&W Executive (subsequent endorsement by partner agencies)		
1.3 Set new national targets that define achievable mid-term objectives: <ul style="list-style-type: none"> • Reduce smoking in the adult population to 13% by 2020 and 9% by 2025 • Reduce smoking in the routine and manual socio-economic group to 21% by 2020 and 16% by 2025 • Reduce smoking among pregnant women to 8% by 2020 and 5% by 2025 • Reduce regular and occasional smoking among 15-year-olds to 9% per cent by 2020 and 2% by 2025 	a) SFW to agree targets for Warwickshire (with clarity re e-cigarette use) and seek endorsement by H&WBB. b) Consider differential targets for districts and boroughs	TCL , SFW, Public Health Observatory	March 2017	Agreed targets for Warwickshire endorsed by H&W Executive (subsequent endorsement by partner agencies)		Warwickshire to adopt the proposed new national targets set out in Smoking Still Kills
1.4 Ensure full implementation of legislative measures already underway including standardised	a) SFW to receive regular reports from Regulatory Services	TSO, EHO , (Police, HMRC)	In place by March 2016 and then 6/12	Benchmarking with other areas		Move as agenda item High level of surveillance

Recommendation	Action	Who (Lead in bold)	Timescales (by)	Measure/Outcomes	RAG rating	Updates (6 months)
packaging, the prohibition of smoking in cars carrying children, the prohibition of proxy purchasing for young people, and the EU Tobacco Products Directive.	<p>regarding the enforcement of enacted measures.</p> <p>b) Dashboard of action to be created. Re-establish links and contact with HMRC.</p>		<p>reports.</p> <p>Ongoing</p>	<p>Consistent and proportionate enforcement/compliance.</p> <p>Identification of supporting measures that can be applied.</p>		<p>Action –yearly report from Trading Standards</p> <p>Verbal report from TS and Env health at each meeting</p>
1.5 Support tobacco control teams in local authorities to develop strategic approaches to reducing smoking prevalence in local communities, exploiting all the opportunities offered by the local government setting.	SFW to participate in the PHE organised Tobacco Control Network and to continue to be involved in Regional and National events as appropriate	TCL	Ongoing (quarterly network meetings)	Reports to SFW		Reported as necessary
1.6 Promote evidence-based supra-local/regional action on tobacco control throughout England where the evidence indicates this is appropriate, such as in tackling inequalities, controlling illicit trade, mass media work and research and evaluation.	The West Midlands is not a region serviced by an office of tobacco control (OTC). However, we are able to utilise the work carried out in other areas - illicit campaigns. In addition Warwickshire may be able to link with neighbours (Coventry) and other authorities to benefit from economies of scale.	TCL	Ongoing	Reports to SFW on potential joint working.		Reported as necessary
	Involve WREP and LGBT Groups in SFW activities	TCL , WREP, LGBT Groups	Ongoing	Proportionate and appropriate campaigns, materials and access to services		As above

Recommendation	Action	Who (Lead in bold)	Timescales (by)	Measure/Outcomes	RAG rating	Updates (6 months)
1.7 Provide expert support and encouragement to low and middle income countries to help implement the WHO Framework Convention on Tobacco Control and its Guidelines.	Paul Hooper to continue to support WHO Missions (e.g. Moldova) in conjunction with TCCC	Paul Hooper	Ongoing	Learning from missions to be shared with partners.		
1.8 Improve national statistics to ensure that timely and robust data are available on smoking prevalence including data on all socio-economic groups, people with long-term conditions, people with mental health problems, minority ethnic groups, the LGBT population and other disadvantaged groups.	Use local statistics and data to add to understanding and interpretation of national data (e.g. SATOD)	Observatory (individual TBC), TCL, WSSS, Pfizer	Ongoing	Detailed reports to SFW regarding interpretation of national data, supported by local information. (E.g. GP Data)		Smoking Needs Analysis completed in October 2016 identifies prevalence of smoking by ward and engagement with stop smoking services
1.9 Improve national data on mortality by requiring smoking history to be recorded on death certificates when it is judged to have been a significant contributory factor.	No local action identified					
1.10 Additional Local Action	Engage with partners to establish whether CLear assessments should be used to help deliver action plan and establishing baseline so that progress can be measured	TCL, ALL	December 2016	An agree process for establishing baseline and monitoring progress against actions		Partners agreed the CLear assessments were out of date and that the process for monitoring progress against the Action Plan would be an annual report to ASC&H OSC
1.11 Additional Local Action	Distribute 'What I can do' sheets to all relevant parties especially elected members	TCL, ALL	March 2017	Wider understanding of effects tobacco control can have.		Update and Disseminate to relevant parties

Section 2 The tobacco industry and the costs of tobacco control

Recommendation	Action	Who (Lead in Bold)	Timescales (By)	Measure/Outcomes	RAG rating	Updates
2.1 Introduce a new annual levy on tobacco companies, the Tobacco Companies Obligation, to help fund evidence-based tobacco control and Stop Smoking Services in England.	Other than being supportive no local action identified					
2.2 Establish a clear mechanism for the calculation of the Tobacco Companies Obligation, based on the costs of evidence-based tobacco control interventions at national, regional and local levels. Apply the levy in proportion to companies' market share in order that monies raised from each company are commensurate with harm caused.	No local action identified					
2.3 Establish a transparent and accountable process for administering the Tobacco Companies Obligation.	No local action identified					
2.4 Seek a revision of the EU Tobacco Tax Directive to prevent the tobacco industry from passing on the costs of the Tobacco Companies Obligation to smokers.	No local action identified					
2.5 Require tobacco companies to make public their sales data, marketing strategies and lobbying activity.	See section 4.10					

Recommendation	Action	Who (Lead in Bold)	Timescales (By)	Measure/Outcomes	RAG rating	Updates
<p>2.6 In accordance with Article 5.3 of the WHO Framework Convention on Tobacco Control and its guidelines:</p> <ul style="list-style-type: none"> • Ensure the tobacco industry is excluded from public health policy-making at all levels of government • Prohibit tobacco companies, and their subsidiaries and agents, from using advertising or 'corporate social responsibility' communications to promote their interests and influence public policy 	See 2.7 below					
<p>2.7 Encourage all local authorities to act in accordance with Article 5.3 of the WHO Framework Convention on Tobacco Control and its Guidelines.</p>	<p>Ensure that all partners are aware of FCTC requirements.</p> <p>(Linked to LGA Tobacco Control Declaration)</p>	TCL , DPH, Chair, ALL	March 2017	Briefing to all partners and H&WBB including those not usually associated with Tobacco Issues (e.g. economic regeneration, litter control) but who may receive approaches from the Tobacco Industry		Legal advice required to inform the briefing on the implications of Article 5.3
2.8 Additional Local Action	SFW to stay abreast of guidance and policy on non-tobacco nicotine products	TCL , WSSS, TSO.	Ongoing	Report to SFW as required		

Section 3 Helping Smokers Quit

Recommendation	Action	Who (Lead in Bold)	Timescales (by)	Measure/Outcomes	RAG rating	Updates
3.1 Ensure that good quality evidence-based Stop Smoking Services are accessible to all smokers, particularly those from lower socio-economic groups and disadvantaged populations.	a) Continue evidence based commissioning of stop smoking services	TCL , CCG	March 2017	Stop Smoking Services are commissioned in areas of deprivation		Contract ends March 2017. The Smoking Needs Assessment will inform future commissioning of Stop Smoking services
	b) Targeted actions to increase access to services	WSSS , TCL , ALL	March 2017	Demographics of those accessing services.		WSSS are assured of the needs assessment process
3.2 Include training on providing very brief advice on smoking cessation within the core curricula of all education programmes for healthcare professionals.	See 3.4 below					
3.3 Ensure that smokers with mental health problems and smokers with long term conditions receive stop smoking interventions as a routine part of their care.	a) Continue to promote 'cut down to quit' model in partnership with CWPT and support smoke free hospital policy	WSSS , CWPT , TCL	March 2017	Numbers of staff trained and clients seen.		Additional training required for mental health workers to complete this action
	b) Engage with CCG to agree plans for joint commissioning for long term conditions	TCL , WSSS , CCG , PHE	March 2017	Joint action plan for long term conditions		Audit required to ensure this action is being delivered
3.4 Promote universal adherence to NICE guidance on tobacco, especially: 3.4.1 •• Brief interventions and referral for smoking cessation	Ensure information on Smoking Cessation included as part of 'MECC' including live or 'warm' referrals where possible	TCL , ALL	Ongoing	Numbers of referrals to WSSS		

Recommendation	Action	Who (Lead in Bold)	Timescales (by)	Measure/Outcomes	RAG rating	Updates
3.4.2• Smoking cessation in secondary care: acute, maternity and mental health services	MECC plays a part but needs to ensure all relevant departments are involved. CQINS to be considered.	WSSS; CCG; GEH; UHCW; CWPT; SWFT, PHE	Ongoing	Referrals to Stop Smoking Services; Quality assurance in acute sector		Pre –op and maternity being done needs reporting at future meetings through rolling agenda
3.4.3• Quitting smoking in pregnancy and following childbirth	See separate Smoking in Pregnancy Action Plan	TCL, WSSS, SSIPS, TCCC, Maternity Services	Ongoing	Report to SFW on detailed SIP action plan		Rolling agenda item
3.5 Ensure that midwives have the training, equipment and time to undertake carbon monoxide screening with every pregnant woman.	In Warwickshire this is already part implemented. Need to ensure training is mandatory; delivered and effective.	SSIPS, Maternity Services, CCG	Ongoing	Report to SFW on detailed SIP action plan		Rolling agenda item
3.6 Ensure that Stop Smoking Services and all health professionals are equipped to provide accurate, high quality information and advice to smokers about the relative risks of nicotine and all nicotine-containing products.	See also reference to MECC. Briefing on proportionate use of Electronic cigarettes to be provided to all GPs, Pharmacists and other professionals involved in giving smoking cessation advice.	WSSS; CWPT; SWFT; GEH (UHW)	December 2015 Ongoing	E-Cigarette briefing issued SFW to monitor		Achieved
3.7 Increase the support and information available to smokers who are unable to quit to switch to less harmful sources of nicotine, in line with the principles set out in the NICE guidance on tobacco harm reduction.	a) Implementation of PHE guidance on electronic cigarettes encourages their integration into the smoking cessation services toolkit.	WSSS, TCL, Acute Trusts	Ongoing	Monitoring by TCL		Need to be aware of any changes in advice that needs advising

Recommendation	Action	Who (Lead in Bold)	Timescales (by)	Measure/Outcomes	RAG rating	Updates
3.8 Regulate the market for electronic cigarettes and other non-tobacco nicotine-inhaling products to maximise their value to smokers/ minimise the risk of uptake by non-smokers.	No local action identified					
3.9 Promote improvements in the quality, safety and efficacy of electronic cigarettes and other non-tobacco nicotine-inhaling products.	TSO to advise wrt safety breaches via CEnTSA SFW stay abreast of developments with non-tobacco nicotine delivery devices (see also 2.8)	TSO ALL	Ongoing	Report developments to SFW		Updates on compliance with regulatory products and Report to WSA when appropriate
3.10 Closely monitor the impact of the market for electronic cigarettes and other non-tobacco nicotine-inhaling products on smoking uptake, smoking behaviour and public attitudes to smoking.	Ensure Stop Smoking Service support those using e-cigarettes (as opposed to in competition with). Monitor those being offered support	TCL, WSSS	Ongoing	Number of quitters using e-cigarettes/other non-tobacco products (higher is better)		Data to be reported at meetings
3.11 Additional Local Action	Revisit joint promotion of Robert West's Smoke Free Formula book via Books on Prescription	WSSS , Warwickshire Libraries; Coventry Public Health	December 2015	Increased take up of SFF		Report at end of year
3.12 Additional Local Action	Encourage all partners to ensure stop smoking services promoted to own workforce	ALL	Ongoing	Increased referrals. Reduced costs to partner agencies.		
3.13 Additional Local Action	Development of an online Quit4good service through a dedicated website	TCL, WSSS	December 2016	Increase in number of quitters accessing the SSS online		Quit4good online service available for health professionals and smokers

Section 4 The affordability and sale of tobacco

Recommendation	Action	Who (Lead in Bold)	Timescales (by)	Measure/Outcome	RAG rating	Updates
4.1 Increase the tax escalator on tobacco products to 5 per cent above the level of inflation.	No local action identified					
4.2 Remove the tax differential between manufactured and hand-rolled cigarettes.	No local action identified					
4.3 Adjust the current national tax regime to raise the price of the cheapest cigarettes and prevent down-trading, and seek a revision of the EU Tobacco Tax Directive to enable the creation of a minimum unit price for all tobacco products.	No local action identified					
4.4 Fully implement the WHO Illicit Trade Protocol including an international tracking and tracing regime for tobacco products.	No local action identified					
4.5 Strengthen and resource national, regional and local partnerships to enable co-ordinated action on illicit trade.	Co-ordinate action through the Serious Organised Crime Joint Action Group	TSO , HMRC, Community Safety	December 2016	Sharing of intelligence between partners		
4.6 Set new targets for the control of tobacco smuggling: <ul style="list-style-type: none"> • Reduce the illicit market share for cigarettes to < 5% by 2020 • Reduce the illicit market share for hand-rolled tobacco < 22% by 2020 and < 11% by 2025. 	a) Local illicit market to be explored and monitored b) Hot spots identified and action plans developed	TSO ; HMRC; Police (SOC) TSO , HMRC, Police	Ongoing	Specific action to be taken where problem areas exist		

Recommendation	Action	Who (Lead in Bold)	Timescales (by)	Measure/Outcome	RAG rating	Updates
4.7 Introduce a positive licensing scheme for all tobacco retailers and wholesalers, to be paid for by the tobacco industry.	Response to consultation on licensing	TCL				
4.8 Develop best practice guidelines for using the licensing scheme to enforce the law on the sale of tobacco, communicate with retailers and control the tobacco supply chain	No local action identified					
4.9 Additional Local Action	Additional mass media activity to be undertaken building upon the week of roadshows featuring sniffer dogs	TSO, TCL, HMRC	Ongoing	Continued publicity regarding illicit tobacco		Repeat annually and report back to WSA
4.10 Additional Local Action	a) Monitor marketing strategies impacting on Warwickshire	ALL (?Crimestoppers?)	Ongoing (as and when available)	Identification of ways in which smokers and other are influenced so that counter measures can be developed. Feed reports to national organisations.		
	b) Analyse sales data	TSO, Observatory	Ongoing (as and when available)	Identification of where smokers are and cross referencing to prevalence data		Will inform the commissioning of the SSS

Section 5 Mass media campaigns and social marketing

Recommendation	Action	Who (Lead in Bold)	Timescale (by)	Measure/Outcome	RAG rating	Updates
5.1 Target mass media and social marketing campaigns on lower socio-economic groups and disadvantaged populations, and provide adequate resources to ensure that their reach, duration and frequency are in line with best practice.	a) Link with national campaigns such as Stoptober; New Year Resolutions; No Smoking Day. b) Develop comprehensive communications / campaign plan for Quit4good	TCL, WSSS, WCC Comms ALL (Communications group)	Ongoing	Communications plan agreed		
5.2 Ensure that all mass media campaigns signpost and promote local Stop Smoking Services.	Clear call to action included on every publicity item	WSSS, TCL, WCC Comms	Ongoing	Quality assurance of campaigns; Numbers accessing to service		
5.3 Additional Local Action	Explore use of social media mechanisms to convert hits into direct contact through the Quit4good website	WCC Comms , TCL, WSSS	December 2015	Improved conversion rates from hits to quit attempts		
5.4 Additional Local Action	Refresh of Smokefreewarwickshire website	WCC Comms , TCL, WSSS	December 2015	Improved website stats (compared with previous site and similar local service sites)		
5.5 Additional Local Action						
5.6 Additional Local Action						

Section 6 Smokefree environments

Recommendation	Action	Who (Lead in Bold)	Timescale (by)	Measure/Outcomes	RAG rating	Updates
6.1 Increase the proportion of homes occupied by adult smokers and dependent children that are smokefree to 80% by 2020 and 90% by 2025.	a) Re- launch smoke free homes packs.	TCL	March 2017	Numbers of packs distributed		Action to be included within new Health Visiting contract
	b) Ensure smoke free homes are publicised and implemented through the Health Visiting (HV) contract	Lead professional for Health Visiting	Ongoing	% Families assisted to smoke free status		
6.2 Remove the smokefree exemption for prisons and provide support to prisoners to remain tobacco-free when they return to the community.	a) Link with CRC and The Recovery Partnership to ensure those being released from Prison receive help to access WSSS.	CRC, NPS, TRP, WSSS	Ongoing	Numbers of smoking offenders accessing services		
	b) Smoke free policy wrt approved premises (to maintain healthy lifestyles) to be explored	PHooper , NPS, CRC	March 2016	Policy established		AP's in the Midlands Division introduced a no smoking policy in September 2015. Residents are not allowed to smoke anywhere in the building.
6.3 Remove the smokefree exemption for theatrical performances.	Assess impact of current law on performances	EHOs	March 2016	Report to SFW to consider action		No complaints received nor any other intelligence to suggest that current legislation is being flouted. Minimal perceived impact on the public health.

Recommendation	Action	Who (Lead in Bold)	Timescale (by)	Measure/Outcomes	RAG rating	Updates
6.4 Extend smokefree regulations to cover sea-going shipping and inland waterway vessels.	Assess extent of issue	EHOs	March 2016	Report to SFW to consider action		No complaints received nor any other intelligence to suggest that current legislation is being flouted. Minimal perceived impact on the public health.
6.5 Review the evidence and consult on the prohibition of smoking in all cars and motor vehicles.	a) Support national media campaigns to inform public of change in the law. b) Local compliance measures to include school run roadshows c) Encourage fixed penalty notices (FPNs) for offences in smokefree private vehicles where compliance is not achieved. d) determine status of police as an enforcement authority for these measures and consider joint action	EHO, Police (TBC) (WMTCN for joint campaigns) TCL to establish the enforcement expectations	Enforcement from October 2015	High levels of compliance.		
6.6 Ensure universal compliance with NICE guidance on a smokefree NHS and promote a smokefree estate including primary & secondary care, maternity services and mental health services.	Survey of all NHS estate to determine current position Identify areas where further action needed	TCL via clear assessment, NHS				

Recommendation	Action	Who (Lead in Bold)	Timescale (by)	Measure/Outcomes	RAG rating	Updates
6.7. Consult on legislative and non-legislative options to make outdoor environments smokefree where there is good evidence that this would improve public health.	Where defensible as a health or reputational risk, designate areas under the control of partner agencies as smokefree where secondhand smoke is an issue (e.g. country park cafe areas, children's play areas, school gates)	TCL , ALL	Ongoing	Numbers of areas designated as smokefree and compliance.		Evidence for smokefree play areas currently being reviewed
6.8 Additional Local Action	WCC to lead the way in implementing a smoke free workplace policy and provide support to staff to quit smoking	TCL , ALL	April 2016	Reduction in number of staff that smoke		
6.9 Additional Local Action	All district and boroughs to pledge support for the implementation of smoke free workplace policies	TCL , EHOs	March 2017	Number of pledges from districts/boroughs		
6.10 Additional Local Action	Support businesses to implement smoke free policies in the workplace and ensure business are informed of impact of smoking	TCL , ALL	Ongoing	Number of businesses implementing smokefree		
6.11 Additional Local Action	Identify local schools to support the campaign for smoke free gates	TCL , Trevor	Jan 2017	Number of schools promoting smoke free gates		Schools survey completed

Section 7 Smoking in films and the wider media

Recommendation	Action	Who (Lead in Bold)	Timescale (by)	Measure/Outcomes	RAG rating	Updates
7.1 Require short anti-smoking films to be shown before films and programmes that portray smoking and can be seen by children and young people, including those viewed in cinemas, on TV and on payto-view internet.	No immediate local action identified. (TCL to explore local action with VOX or other appropriate youth organisations)	TCL, VOX	TBC	TBC		
7.2 Raise awareness among policy-makers of the harm to children and young people of smoking in films, and consult on options to reduce their exposure to images of smoking in films and other media including the internet, music videos and computer games.	Ensure opinion formers are briefed on the influence of films etc. on young people and their future smoking prevalence.	TCL, ALL	Ongoing	Support for action to protect young people from the influence of the tobacco industry. Media studies? Video Games		
7.3 Additional Local Action	Use the release of films with gratuitous smoking scenes (especially those aimed at young people) to draw attention to issue (Media releases)	TCL, WCC Comms	Ongoing	Media coverage achieved		

Section 8 Smoking in schools

Recommendation	Action	Who (Lead in Bold)	Timescale (by)	Measure/Outcomes	RAG rating	Updates
8.1 Additional Local Action	Identify the evidence for linking smoking with educational achievement and communicate through the education channels	TCL	March 2017	Number of schools who register interest in addressing smoking		
8.2 Additional Local Action	Work with schools to identify resources that focus on the social norms approach to smoking, linking with alcohol and drugs	TCL	March 2017	Resources available online		Additional capacity required to complete this action
8.3 Additional Local Action	Ensure the school health and wellbeing service is trained to provide advice/support and referral to young people to quit smoking	TCL/SSS	March 2017	Number of pupils supported to quit smoking		Training required for School Nurse teams to complete this action