Operational Decision Record

Decision Reference Number
4968

Decision Title

To award Stub It! Up to £51,098.12 for the remainder of their contract by way of contract variation for additional costs of Nicotine Replacement Therapy (NRT) and to provide training for service staff to support those aged 12+.

Decision Value

Up to £51,098.12.

- Up to £50,478.12 £72.84 per person for NRT once they exceed their yearly indicative budget for NRT of £108,000.
- £620.00 for training and professional development to ensure StubIT staff are compliant to deliver stop smoking and behaviour change support to those aged 12 – 15 years.

Revenue or Capital Spend?

Revenue

Department

Public Health

Contact Officer (Name, job title, and contact details)

Swathi Krishnan

Public Health Manager - Smoking & Tobacco

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Decision Taken

Operational Executive Decision – To award Stub It! £72.84 per person for NRT (Nicotine Replacement Therapy) up to £50478.12 once they exceed their yearly indicative budget for NRT of £108,000 and £620 to provide professional training for staff within the service to support those aged 12+ to stop smoking.

Reasons for Decision and Background Information

Public health grant is allocated to local authorities to support their statutory responsibilities relating to the health and wellbeing of their local population. Public health grant conditions require the main and primary purpose of all spend from the grant to be public health. Stopping smoking falls under those responsibilities.

Smoking data for Nottingham:

- The smoking rates in Nottingham have been reducing steadily with a current adult smoking prevalence of 16.5%. However, this is still higher than the national average of 13.0% in 2021.
- Smoking remains one of the largest causes of ill-health and early death in Nottingham.
- It has an impact on children and young people's lives through pregnancy to adolescence, with 13% of pregnant women smoking at the time of delivery in city. This is significantly higher than the national average of 9.1%.
- The majority of children do not smoke, however about 8% of children 15 years and younger in Nottingham have reported that they have or do smoke.
- Tobacco is associated with significant economic burden on the society with a total smoking cost of £137.17 million in Nottingham.

StubIt! is the community smoking cessation service commissioned by Nottingham City Council and is currently providing smoking cessation support for those aged 16+. They provide behavioural therapy along with NRT (Nicotine Replacement Therapy) for those who want to quit and provide follow up support and guidance for up to 12 weeks.

Reason for decision

The original total contract value for the community smoking service is £930,000 and the contract runs until end of March 2024 (3 years); thus, it has an annual contract value of £310,000. At the time of tender, Nottingham City Council indicated that NRT costs were anticipated to be circa £100,000.

However, data for 2022/23 has shown that the spend on NRT is higher than the anticipated value, spending £108,000 on NRT whilst at the same time seeing fewer smokers than set within the contract's annual key performance indicators (KPIs). The additional cost of £8,000 has been paid by the provider within the current contract value.

Since the commencement of the contract

• There has been an increase in NRT costs in the last 2 years with the Drug Tariff seeing two price rises in the last 12 months.

• In 2023/24, we expect increased referrals through new Long-Term Plan (LTP) pathways for inpatients and maternity. As such, we expect the community service to achieve or exceed the agreed KPIs in 2023/24.

The proposal sets out that there will be a capped spend on NRT in line with 2022/23 data of £108,000. Thereafter NRT spend will be based on a per person tariff.

It is estimated that, to achieve the KPIs, there will be an additional cost of

- £50,478.12 (additional 693 people supported to stop smoking)
- £72.84 per person for NRT according to the current average spend on NRT per person within the service (i.e., accounting for those that quit and those that do not).

There is no requirement within the contract to provide an increase in payment. However, it is the responsibility of the commissioning organisation to ensure that contracts are adequately funded to safely meet the required specifications. So, it is proposed to provide the additional funds for right-sizing of the contract due to cost increases of quit aids and the continued ambition to achieve the Key Performance Indicators originally agreed. Without the funding, it would lead to fewer people being supported to stop smoking which is a critical priority area and a risk that the provider could stop delivering during the contractual year due to spending the allocated funding.

12+ stop smoking support

In addition, it is proposed to fund professional development of the stop smoking advisors to provide support for 12 – 15 year olds. It is recognised that, despite a lack of local data on smoking amongst children, public health (school) nurses and headteachers continue to recognise smoking as an issue for Children and Young People as young as 12 years. This will provide insight into the demand for this service and/or work needed alongside the learning from neighbouring services who have a similar 12y+ service offer. This insight collected will inform new models of delivery for public health 'lifestyle' services.

If approved the changes to the funding of the service will be reflected in a contract variation until March 31st, 2024.

Best value thinking – Does it deliver on our purpose/outcomes?

- Yes, smoking cessation and supporting vulnerable populations is an important delivery theme, and this will contribute towards achieving our vision of having a smoke free generation by 2040.
- Compared to other community stop smoking services and despite lower-thanexpected numbers, the service provides a competitive cost per quitter.
- The proposal is payment by activity ensuring that payment is only allocated to those supported by the service.

Does it comply with governance/regulations?

 Yes, there will be a contract variation document signed and agreed by Nottingham City Council Public Health and NCGPA (Nottingham City GP Alliance).

Is it affordable/best use of resource?

 Yes, the increase in funding is accounted for within the public health grant and allocated Smoking & Tobacco budget.

Other Options Considered and why these were rejected

No additional investment for NRT – this option has been rejected. Not providing NRT funding support would place pressure on the provider and likely lead to a reduction in ability to respond to need and negatively impact the services ability to support residents.

No additional funding for staff training to provide support for 12-15 year olds – If staff are not sufficiently trained to support 12-15 year olds it would mean that we are unable to tend to the local need for additional support for this age group. It would also not provide the opportunity for new learning on service requirements ahead of future procurement of services.

Reasons why this decision is classified as operational

The proposal has a value below £250,000

Additional Information

• It is recommended that you seek and include finance advice where your decision has financial implications.

You should also consider:

- obtaining and recording advice if necessary, from legal, finance or other colleagues
- informing relevant ward councillors if a decision particularly affects their ward
- whether an EIA, DPIA, Carbon Impact assessment or consultation exercise is required for this decision
- for capital spend, confirmation that the decision has been through the appropriate capital approval processes
- referring to any related previous decisions
- risks of the decision and any mitigation of those risks
- if the decision is approving capital spend, please include confirmation that the Chief Finance Officer has agreed to it.

Decision Maker (Name and Job Title)

Lucy Hubber – Director of Public Health

Scheme of Delegation Reference Number

Date Decision Taken
15.06.2023