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HSE Irish Health Promoting Health Services

# ***HSE Tobacco Control Framework 2010 – 2015***

**Dr Fenton Howell,  
National TCFIG Member  
Lead - Prevention of Chronic Disease Programme**

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# National Context



HSE Irish Health Promoting Health Services

- **1986: Health – The Wider Dimension**
- **1987: Promoting Health through Public Policy**
- **1994: Shaping a healthier future**
  - 1996 – National Cancer Strategy
  - 1999 – Building Healthier Hearts
  - 2000 – National Health Promotion Strategy
  - **2000 – Towards a tobacco free society**
- **2001: Quality and Fairness**
  - 2004- Public Health Tobacco Acts
  - 2006 - A Strategy for Cancer Control in Ireland
  - 2008 - Tackling Chronic Disease
  - 2010 - National Cardiovascular Health Policy
- **2013: Healthy Ireland**
  - **2013- Tobacco Policy Review Group Report - awaited**





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# Health Service Context



HSE Irish Health Promoting Health Services

- **1994: Shaping a healthier future**
  - 1995-2004 Smoking Target Action Group (STAG)
- 2005: Health Service Executive
  - 2005-2008 Corporate Plan
  - 2007-2010 Transformation Programme
  - 2008-2010 Corporate Plan

**QUIT**



## 2005-2008 Corporate Plan



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IIC Irish Health Promoting Health Centres

<b>2.3.2</b>	Work with the Office for Tobacco Control to ensure implementation of "Towards a Tobacco Free Society" and the Public Health Tobacco Acts.	<ul style="list-style-type: none"><li>▪ National framework to address tobacco use developed</li><li>▪ Evaluation of national inspection programme completed</li><li>▪ Guidelines and quality standards for smoking cessation developed</li></ul>
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## 2008-2010 Corporate Plan

A shift towards prevention and better self care rather than a focus on acute care and treatment – This will require strong illness prevention initiatives, health promotion and population health strategies and the development of a chronic illness management framework.



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## 2007-2010 Transformation Programme



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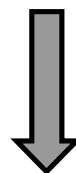
### Programme 4:

**Implement a model for the prevention and management of chronic illness.**

We will have evidence based prevention programmes and treatments for people with chronic illnesses such as diabetes, chronic obstructive pulmonary disease and cardiovascular problems.

Our performance in reducing the risk factors for chronic illness and improving patient satisfaction will be measured.

This will provide better outcomes and survival rates for people with chronic illness.



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# Service Plans 2005-2013



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## 2005 (131)

- Target behaviours in relation to smoking, nutrition and food intake (related to obesity), alcohol and exercise
- Promote and protect public health through the appropriate enforcement of Food Hygiene and Tobacco Control legislation

## 2006 (115)

- Continue to work towards the implementation of the relevant aspects of the Public Health (Tobacco) Acts within the mental health setting.
- Develop a national framework to address tobacco use, in consultation with key stakeholders. This will also include guidelines and quality standards for smoking cessation services.



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## 2007 (158)

- Monitor prevalence trends of smoking and tobacco use through the SLAN and HBSC surveys
- Enforce tobacco control legislation and establish National Tobacco Control database
- Develop and expand health promotion campaigns on tobacco
- Progress the National Tobacco Control Framework with key stakeholders

## 2008 (193)

- Deliver health promotion campaign on tobacco
- National Tobacco Control Framework action plan completed and in implementation phase
- HSE/OTC business plan implemented
- Capacity to implement additional legal provisions on point of sale secured
- National Tobacco Control Database rolled out.



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## 2009 (98)

- Environmental health- protection of public health through effective enforcement of the environmental health legislation, e.g. tobacco legislation

## 2010 (94)

- Business plan on tobacco control agreed and implemented in conjunction with OTC and DoHC
- Tobacco Framework completed and signed off

## 2011(89)

- Enhanced services for targeted groups by implementing the following programmes through PCTs: Smoking cessation
- Community Oncology Programme- brief interventions with smoking cessation with primary care teams developed
- Enforcement of statutory function continued in relation to tobacco control





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# Tobacco Control Framework Implementation Group



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- Tobacco Control Framework approved by HSE Management Team 2010
- TCFIG established by HSE Management Team
- Chaired by Dr Patrick Doorley
- Representatives from: Health Promotion, Environmental Health, Public Health, NTCO, Communications, Primary Care, Finance, Human Resources, Clinical Strategy and Programmes, Quality and Clinical Care, National Cancer Control Programme, Mental Health and RDOs
- Informed and supported by the Tobacco Control Stakeholder Network





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## 2012 (107)

- Develop and deliver to health care staff a national model for brief intervention training (tobacco, alcohol, diet, mental health).
- Enhance smoking cessation training for all health care professionals including e-learning
- Continue to monitor and enforce existing and new environmental health functions including food, tobacco..
- Implement the recommendations of the HSE's Tobacco Control Framework and the Government's strategy Towards a Tobacco Free Society : Report of the Tobacco Policy Review Group

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**Tobacco Control Framework**

Review smoking cessation services, develop and roll out standardised national model to include national database

Q3

Deliver standardised training in brief intervention for smoking cessation to 3,521 frontline healthcare workers, prioritising settings going tobacco free in 2012:

Ongoing

- DNE 1,083
- DML 542
- South 813
- West 1,083

Continue national roll out of tobacco free campus policy:

- DNE – five hospitals, all newly opened primary care sites, all administration sites
- DML – two hospitals, all newly opened primary care sites, all administration sites
- South – two hospitals, all newly opened primary care sites, all administration sites
- West – four hospitals, all newly opened primary care sites, all administration sites

Develop and implement a national policy to protect staff from second-hand smoke exposure while working in domestic settings

Q2

Develop and implement a national policy to protect children in care from tobacco exposure

Ongoing

Maintain social marketing QUIT campaign

Ongoing

Continue to monitor and evaluate the effectiveness of tobacco control measures

Maintain tobacco legislation enforcement

**HSE National Tobacco Control Office**

Implement recommendations of *Towards a Tobacco Free Society: Report of the Tobacco Free Policy Review Group and the Tobacco Control Framework*

Ongoing

Support the implementation of the DoH's Tobacco Policy Review Group recommendations (when finalised)

Fulfil statutory obligations under Tobacco legislation





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## 2013 (128)

- Implement the recommendations of the HSE's Tobacco Control Framework and the Government's strategy Towards a Tobacco Free Society : Report of the Tobacco Policy Review Group and enforce the Public Health (Tobacco) Act and other tobacco control legislation
- Support the DoH in policy development and implementation
- Deliver accredited brief intervention training for smoking cessation to frontline staff
- Maintain social marketing QUIT campaign
- Continue roll out of tobacco free campus policy
- Deliver a national model for smoking cessation services

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Tobacco Control	Tobacco Control Framework	
	<ul style="list-style-type: none"> <li>☐ Roll out standardised national model for smoking cessation service</li> </ul>	Q1-Q4
	<ul style="list-style-type: none"> <li>☐ Provide efficient smoking cessation support via National Smokers' QUITline</li> </ul>	Q1-Q4
	<ul style="list-style-type: none"> <li>☐ Deliver accredited training in brief intervention for smoking cessation to 1,350 frontline healthcare workers:               <ul style="list-style-type: none"> <li>- DML 300</li> <li>- DNE 400</li> <li>- South 250</li> <li>- West 400</li> </ul> </li> </ul>	Q1-Q4
	<ul style="list-style-type: none"> <li>☐ Extend national roll out of tobacco free campus policy:               <ul style="list-style-type: none"> <li>- DML – all hospitals, all newly opened primary care sites and 35% of existing sites, all administration sites</li> <li>- DNE – all hospitals, all newly opened primary care sites and 35% of existing sites, all administration sites</li> <li>- South – all hospitals, all newly opened primary care site and 35% of existing sites, all administration sites</li> <li>- West – all hospitals, all newly opened primary care sites and 35% of existing sites, all administration sites</li> </ul> </li> </ul>	Q1-Q4
	<ul style="list-style-type: none"> <li>☐ Launch national policy to protect staff from second-hand smoke exposure while working in domestic settings</li> </ul>	Q2
	<ul style="list-style-type: none"> <li>☐ Develop and implement a national policy to protect children in care from tobacco exposure</li> </ul>	Q4
	<ul style="list-style-type: none"> <li>☐ Maintain social marketing QUIT campaign</li> </ul>	Q1-Q4
	<ul style="list-style-type: none"> <li>☐ Undertake tobacco control enforcement action in areas of least compliance (complaints, underage sales, and smoke free exempted areas)</li> </ul>	Q1-Q4
	<ul style="list-style-type: none"> <li>☐ Continue to monitor and evaluate the effectiveness of tobacco control measures</li> </ul>	Q1-Q4
	<ul style="list-style-type: none"> <li>☐ Advocate to 3rd level institutions / medical colleges for the introduction of brief intervention training / cessation training in all graduate and post graduate education</li> </ul>	Q4
	<p><b>HSE National Tobacco Control Office</b></p>	
	<p>Implement recommendations of <i>Towards a Tobacco Free Society Report</i> and the <i>Tobacco Control Framework</i></p>	Q1-Q4
	<p>Support the development of and implement the DoH's Tobacco Policy Review Group recommendations (when finalised)</p>	Q1-Q4
	<p>Maintain tobacco legislation enforcement</p>	Q1-Q4





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# National Performance Indicator Activity Suite



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Health and Wellbeing				
Performance Activity / Key Performance Indicator	Reported By and Frequency	Expected Activity / Target 2012	Projected Outturn 2012	Expected Activity / Targets 2013
<b>Tobacco Control</b>				
% hospital campuses with tobacco-free policy	AND EH Quarterly	17 35%	19 39%	100%
No. and % of smokers on cessation programme who were quit at one month	AND EH Monthly in arrears	---	---	Baseline to be established
No. of smokers who received intensive cessation support from a cessation counsellor	AND EH Monthly	---	---	9,000
No. of frontline healthcare staff trained in brief intervention smoking cessation		3,521	933	1,350
No. of sales to minors test purchases carried out	AND EH Quarterly	216	282	320

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# Tobacco Control Framework



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- Action Plan updated since 2010
- Has 39 actions across the MPOWER spectrum
- Monitor - 8
- Protect – 6
- Offer – 14
- Warn – 3
- Enforce – 6
- Raises (taxes) - 2
- Current status
  - 14 actions fully delivered
  - 11 on target
  - 9 behind schedule
  - 5 challenging and need further revision
- 20 months left!

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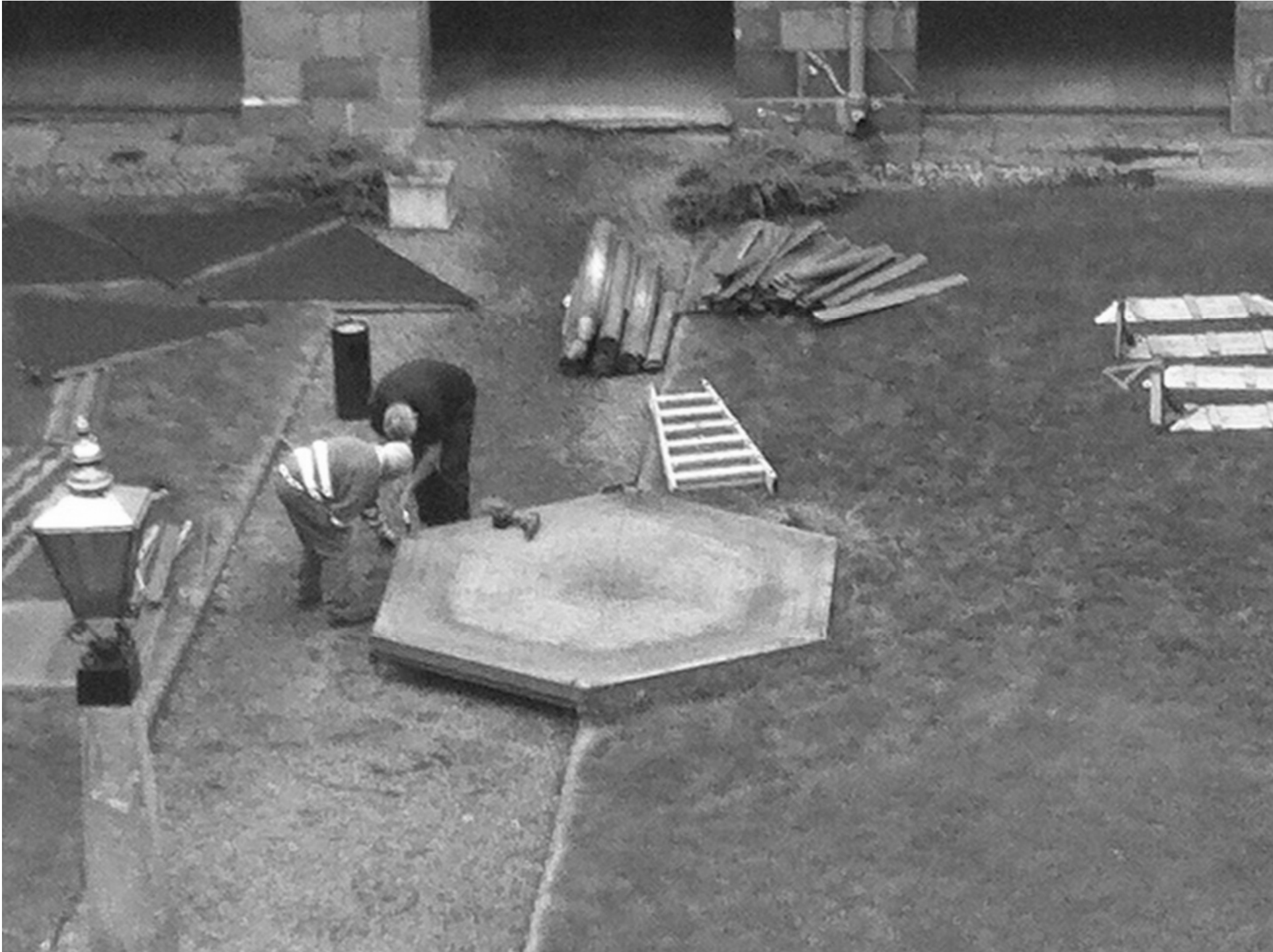
## Key areas of note in TCF



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- Tobacco Free Campus
- QUIT Campaign
- DOH Tobacco Policy Review Group
- Environmental Health Services
- Protect from SHS in domestic setting
- QUITline – integrated communications service
  - phone, online, facebook, sms text, twitter, chat, email
- National Standard for Tobacco Cessation Support
- Brief Intervention for Smoking Cessation
- Staff Survey- smoking prevalence







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## Key areas of note in TCF



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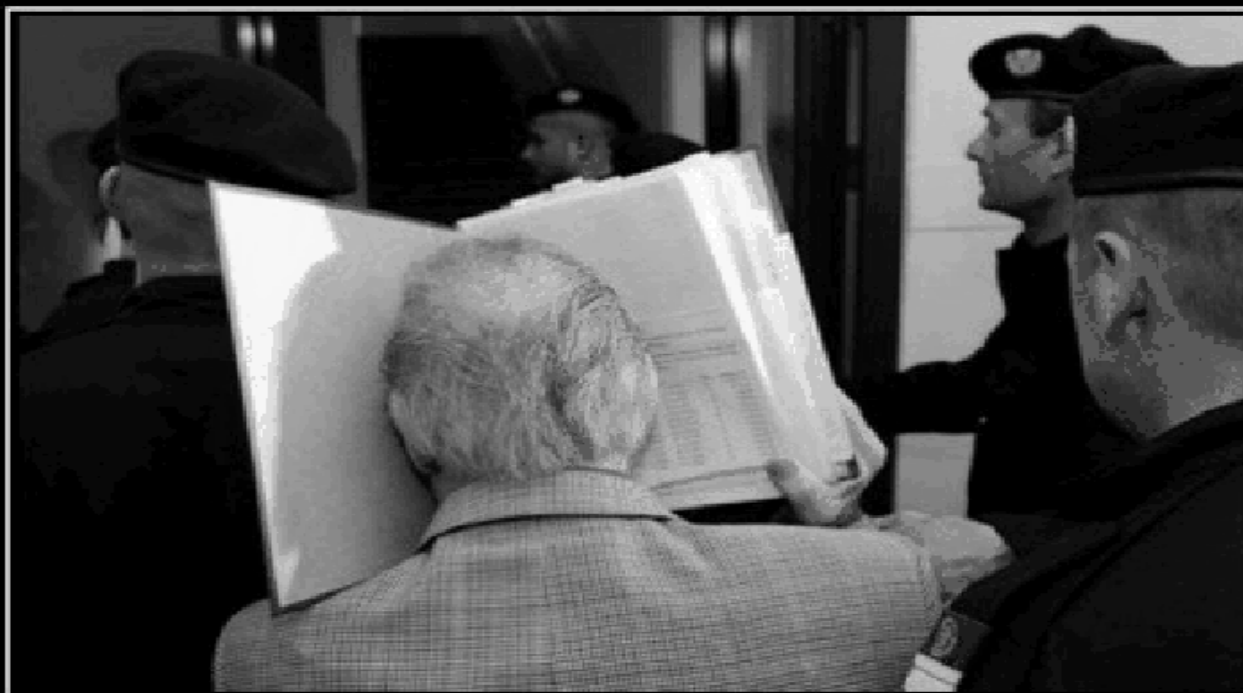
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FACEBOOK

You're doing it wrong.

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## Key areas of note in TCF



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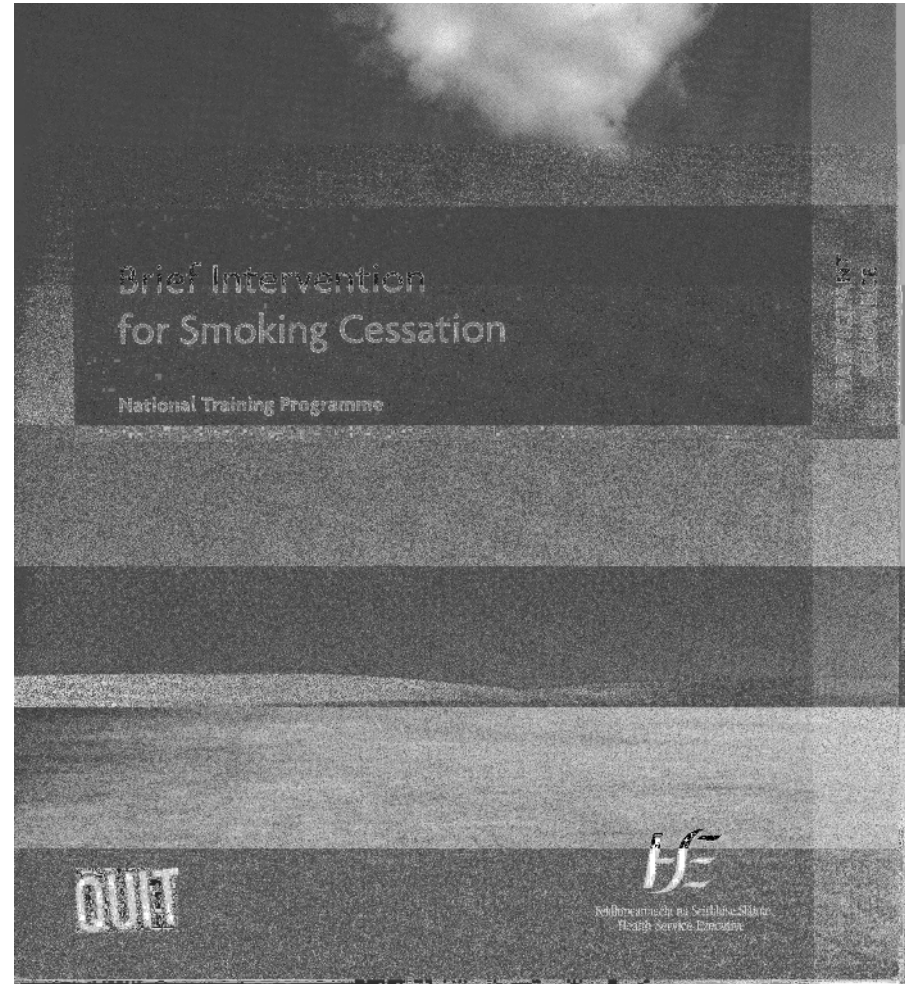
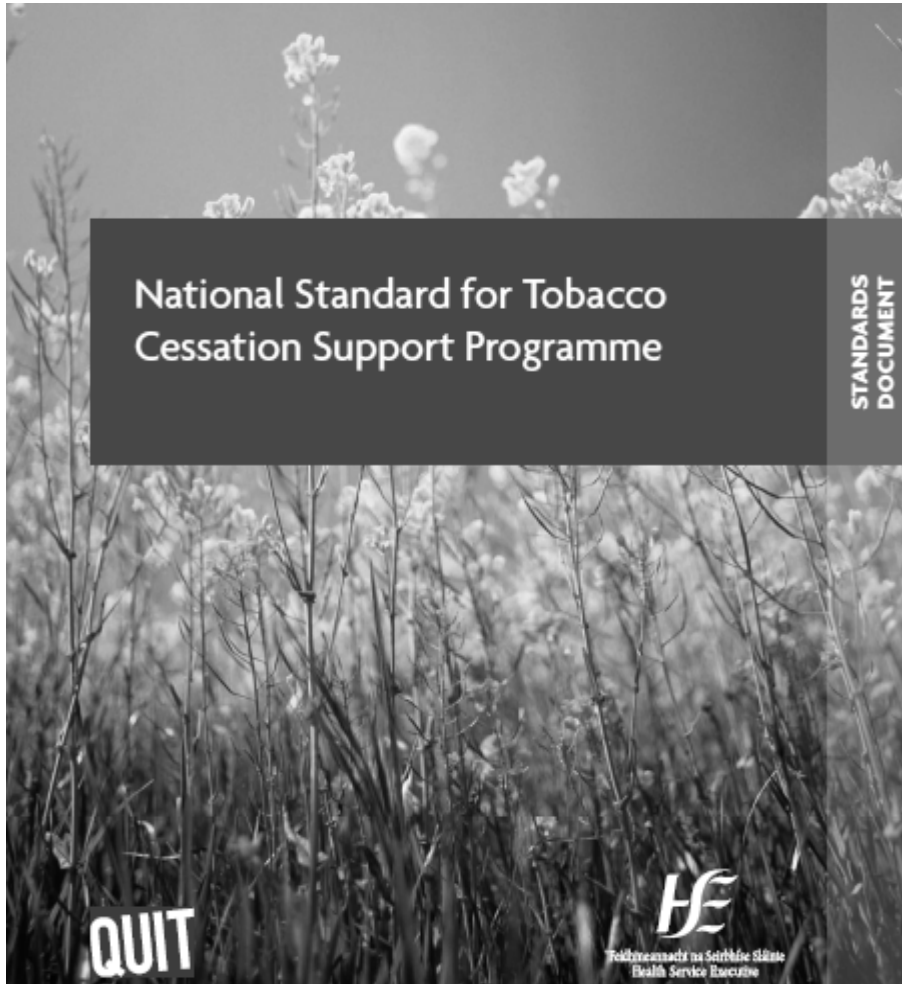
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QUIT



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# HSE Staff Survey



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- Staff smoking 15% (11% daily, 4 % non-daily)
  - Medical : 4% → General Support Staff: 25%
- Would like to quit: 81%
- Advised to quit: 42%
- Have tried to quit: 48%
- Awareness of any QUIT service – 64%
- Awareness of “1 in every 2”: 75%
- We need to encourage staff who smoke that they should quit and make sure that they know how to quit.

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# Clinical Strategy and Programmes Directorate



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- Dr Áine Carroll - National Director
  - Implementation of pathways of care
  - Integrated approach to assessment improvement and quality
- Improve quality and access and reduce cost
- 30+ programmes
- Prevention of Chronic Disease Programme

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# Prevention of Chronic Disease Programme Working Group



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*HSE Irish Health Promoting Health Services*

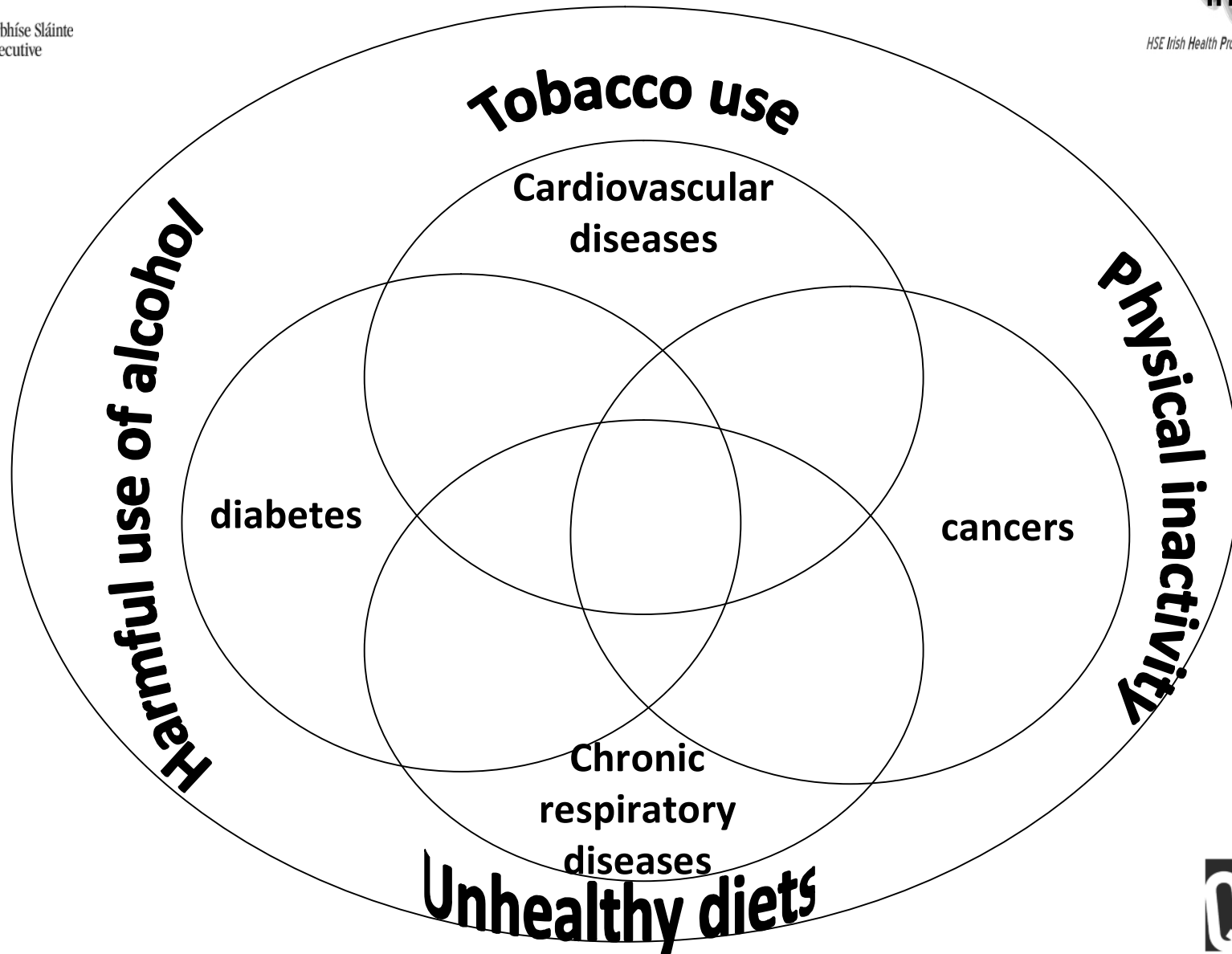
- **Programme Lead: Dr. Fenton Howell**
- GP Lead Co-ordinator: Dr. David Hanlon
- Programme Manager: Regina Black
- Consultant Public Health Medicine: Dr. Siobhan Jennings
- Public Health/ Community Nursing: Maria Kelly
- Acute Nursing Services: Kate Walsh
- Practice Nursing: Marie Courtney
- Therapy Rep (Physio): Declan O'Hanlon
- Therapy Rep (Dietitian): Margaret O'Neill
- Health Promotion: Andy Walker
- Cancer Control: Dr. Marie Laffoy
- Cancer Screening: Maeve Cusack
- Psychologist: Dr. Veronica O'Doherty
- Pharmacy Liaison: EOI
- Librarian Support: Bennery Rickard/ Gethin White



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# Prevention of Chronic Disease Programme



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## Aim

- To make every healthcare contact and every policy count in order to prevent morbidity and mortality from chronic disease.

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**“Lose some weight, quit smoking, move  
around more, and eat the carrot.”**

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# Treating tobacco as a care issue



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**“My doctor told me to stop smoking cold turkey. That was easy, because I never smoked cold turkey in the first place!”**

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# Treating tobacco as a care issue



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- ISQSH 2010 Measuring the patients experience of hospital services
  - Current smokers: 25.8%
  - Former smokers: 31.1%
- Hospital specific surveys
  - SVUH 1997-98: Current smokers: 24.2%
  - SVUH 2006: Current smokers: 22.7%
  - Beaumont 2011: Current smokers: 21%



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## National HIPE data on smoking



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- New codes to capture smoking status since 2005
- Acute hospitals, 18+, inpatients (excl Maternity)  
344,368 discharges
- Current tobacco use in 2011: 13.4%
  - Range 3.5% to 23.6%
  - Range Cancer Centres 6.3% to 22.8%
- Former tobacco use in 2011: 11.1%
  - Range 1.0% to 25.7%
  - Range Cancer Centres 1.3% to 15.9%
- Counselling for tobacco use in 2011: 271 patients
  - 6 hospitals, 1 hospital accounts for 70%



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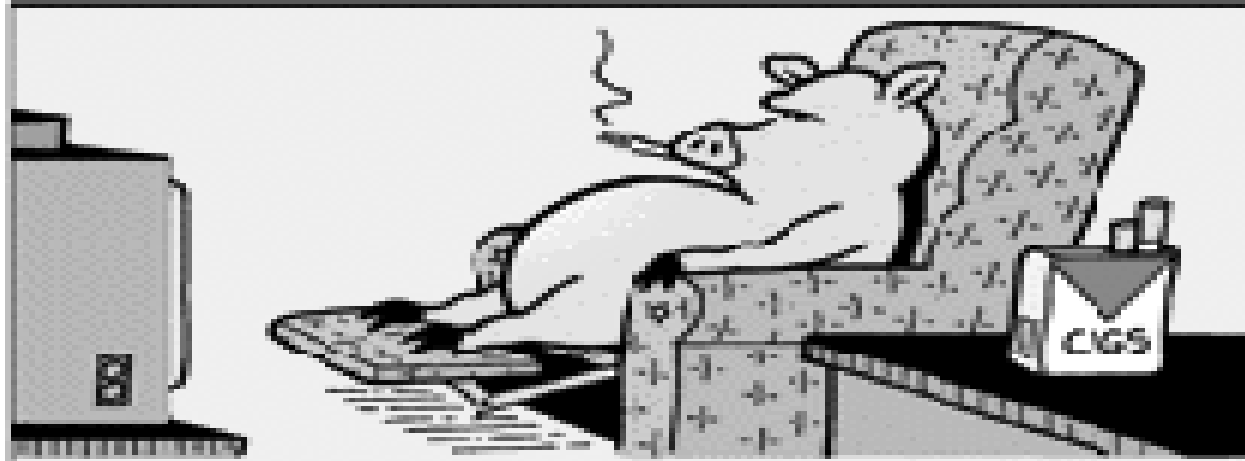
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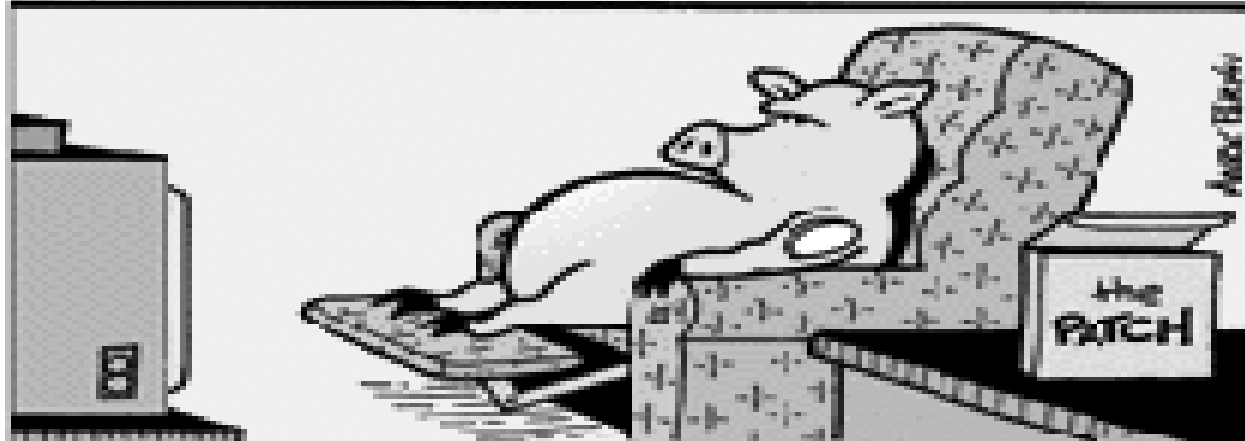
by Mark Parisi



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## Conclusion



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- A lot done – more to do!
- You can't manage what you don't measure
- Tobacco Control Framework provides the structure to bring tobacco control to the fore in the HSE
- Supported by Prevention of Chronic Disease Programme
- HSE alone cannot win the war
  - Needs support from stakeholders
  - Needs Healthy Ireland