



**SMOKEFREE DEVON ALLIANCE
ANNUAL REPORT 2014-15**

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Introduction

This report covers the second year of tobacco control work with Public Health based within the local authority.

The Alliance works to a three-year strategy which was refreshed and published in April 2013 and will be due for a refresh in the New Year 2016.

The implementation of the Smokefree Devon Alliance Strategy is vital to improving the health of the population and the economic health of Devon. Tobacco control action is undertaken on a range of fronts, not only by large or public organisations but by smaller agencies, communities, district councils and individuals working in partnership to deliver concerted and co-ordinated interventions. Devon has made significant progress in tobacco control but must continue to take sustained and comprehensive action to ensure that tobacco is less attractive, less available and less accessible.



Smokefree Devon Alliance Strategy

The most Devon Smokefree Alliance was published it in April 2013. It is available to download from www.devonhealthandwellbeing.org.uk.

Aims

- To improve the health of the population of Devon by reducing the smoking prevalence rate and exposure to second-hand smoke
- To reduce health inequalities in Devon in the longer term by reducing the number of smoking-related illnesses suffered by the population.

Objectives

- reduce the number of people that smoke by at least 1% a year
- reduce the supply of and demand for illicit tobacco
- reduce the number of young people smoking to below that of the national average
- reduce the number of homes where children are exposed to second-hand smoke
- reduce the number of underage sales of tobacco to children and young people
- reduce the number of pregnant women smoking
- increase the number of smokefree places and promote why and how to quit smoking
- increase the number of smokers using the local stop smoking services
- raise the profile of smoking and its dangers so every smoker understands the dangers of smoking and second-hand smoke and also knows how to access the local NHS service

The Alliance operates a one-year action plan that supports its Tobacco Control Strategy 2012-15. Each action plan addresses a priority area identified in the strategy. These are:-

Priority Areas of the Alliance

1. Reduce health inequalities caused by smoking
2. Reduce illegal tobacco in the community
3. Protect children and young people from smoking and reduce the availability of tobacco to underage consumers
4. Reduce the number of pregnant women smoking
5. Normalise a smokefree lifestyle
6. Support smokers to quit
7. Carry out marketing and communication programmes.

Accountability

The Smokefree Devon Alliance Steering Group meets every four months.

The Steering Group has a reporting link to Health and Wellbeing Board where performance indicators are tracked on adult smoking prevalence and smoking in pregnancy.



Progress on Actions 2014-15

General

The Alliance was an active member of the Smokefree Action Coalition and continued to promote the Local Government Declaration on Tobacco Control.

The **Local Government Declaration on Tobacco Control** displays a commitment to take comprehensive action to address the harm from smoking. The Declaration commits councils to:

- Reduce smoking prevalence and health inequalities
- Develop plans with partners and local communities
- Participate in local and regional networks
- Support Government action at national level
- Protect tobacco control work from the commercial and vested interests of the tobacco industry
- Monitor the progress of plans
- Join the Smokefree Action Coalition.

As at 31st March 2015, signed to the <http://smokefreeaction.org.uk/declaration/> were the following local authorities:

Devon County
East Devon
West Devon
South Hams
Teignbridge
Exeter

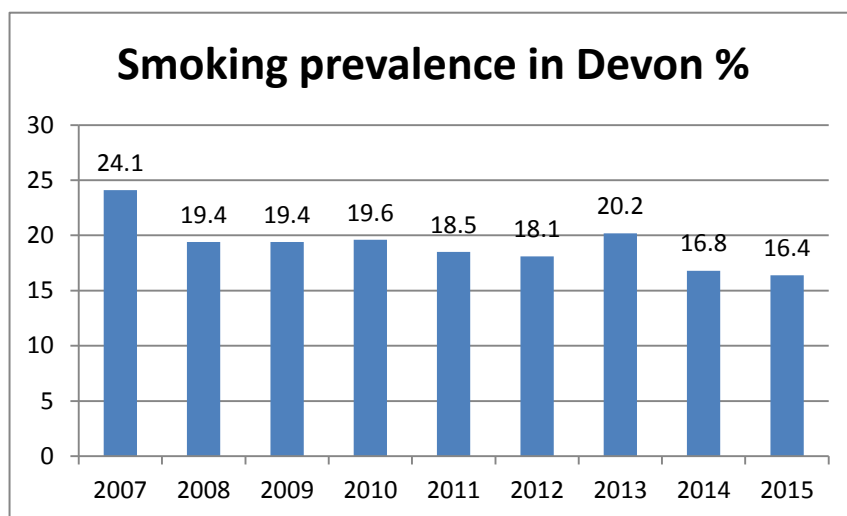


The North Devon District Hospital and the Royal Devon and Exeter NHS Foundation Trust signed the NHS Statement on Tobacco Control. As NHS trusts, they join North and East Devon CCG who had already signed in 2013-14.

West Devon Council leader, Cllr Philip Sanders and joint Executive Director, Alan Robinson sign the Declaration.

Smoking prevalence in Devon continues to fall and is lower than the national average of 18.4% at 16.4%. (Tobacco Control Profile Feb 2015). See Table 1 below.

Table 1. Smoking prevalence in Devon. Source: Health Profiles



In September 2014, [Action on Smoking & Health](#) (ASH) published data showing the cost to local authorities of enabling people with smoking related illness to stay in their own homes. The true figure may be much higher because of lack of information on some costs. The figures for Devon are listed in Table 2 below.

Table 2. Costs of domiciliary care in Devon County Council

18+ Population 2012 DEVON	612,108
Social Care Cost to local authorities (based on 50+ smokers)	£9,613,350
Cost to self funders (informal care)	£7,127,798
Number of people needing additional care from LA/social services (based on 50+ smokers)	597
Number of people needing additional care from friends/family (based on 50+ smokers)	6,890
Number of people needing additional care from friends/family (based on 50+ ex-smokers)	6,479

Priority Area 1 - Reduce health inequalities caused by smoking

Stopping smoking is the strongest action we can take to improve the health of our population. The Marmot Review, Fair Society, Healthy Lives: A Strategic Review of Health Inequalities in England Post-2010 (2010) identifies strengthening the role and impact of ill-health prevention as one of its six policy objectives. The review stressed that tackling health inequalities was a matter of social justice, with real economic benefits and savings. The review recognises that the losses from illness associated with health inequalities account for productivity losses including reduced tax revenue, higher welfare payments and increased treatment costs. It recommends action across the social gradient of health – not just on the health of the most disadvantaged – across the social determinants of health.

For tobacco control work, this means efforts need to be targeted towards helping smokers from routine and manual groups as they make up the largest group of smokers. Ultimately by reducing smoking rates in this group we are likely to make the biggest difference to our overall smoking cessation rates. Stop smoking services should also target very deprived smokers, but the biggest gains are to be made in the routine and manual population. The Alliance has developed profiles of where these populations live and how they are influenced.

Reducing smoking rates in disadvantaged groups and areas is a critical factor in reducing the health inequalities gap as evidence suggests that tobacco use is the primary reason for the gap in healthy life expectancy between rich and poor. There is also evidence to show that poorer smokers are more physically addicted to nicotine, and are therefore less likely to succeed in their quit attempts.

The availability of illegal tobacco makes tobacco more affordable. The Alliance supports strengthening resources and partnership working to tackle illegal tobacco in our community.

The Alliance recognises that higher taxation on tobacco is an effective tobacco control measure. However, it can increase poverty for those who buy legal cigarettes and are very addicted with limited incomes. The Alliance supports exploring other options to support these members of the community for example financial advice, tobacco harm reduction programmes, and more intensive stop smoking support.

The Alliance recognises that smoking prevalence is very high in vulnerable groups such as drug and alcohol users, mental health and offender institutions. The Marmot Review recommends effective participatory decision making at a local level by empowering individuals and communities. The Alliance will use all opportunities to take this approach.

Progress

Mental Health and Harm Reduction

Devon Stop Smoking Service has continued to work closely with Devon Partnership Trust. As part of the Alliance's harm reduction plan, it ran a pilot programme inviting residents in the Russell Clinic to take part in cutting down their smoking with a view to setting a quit date and quitting tobacco completely by the end of the programme.

The screenshot shows the healthwatch Devon website. At the top, there is a cookie notice: "This site uses cookies" with a "No problem" button and a "More info" link. Below this is the healthwatch Devon logo, including the freephone number 0800 520 0640 and social media icons for YouTube, Twitter, and Facebook. A navigation menu is visible with options: Home, Speak Out, Be Informed, News, About Us, Be Involved, What the Health!, and Engagement Gateway. A news banner reads: "Healthy People March 2015 Northern Devon Healthcare NHS Trust ranked fourth best in England in latest survey of NHS staff". The main article headline is "No Smoking Day 2015 – focus on mental health", dated "On March 6, 2015 - Add Comment". The article text includes: "On 11 March, The British Heart Foundation's No Smoking Day returns for its 32nd year. The annual campaign inspires and helps smokers who want to quit. This year, over one million smokers are expected to use No Smoking Day to quit." and "As well as supporting as many smokers as possible to take part and begin their smoke-free lives from 11 March, Devon County Council Public Health has been working with Devon Partnership NHS Trust to provide support for people with mental health issues – who are particularly susceptible to the damaging effects of smoking." It also states: "Smoking prevalence in Devon is 16.4%, lower than the national average. However, smoking rates among adults with a common mental health condition, such as depression or anxiety, are almost twice as high as those of other adults, and three times higher for those people with".

This pilot was extremely successful as a piece of partnership work and it engaged the residents well. Outcomes included smoking cessation, smoking reduction, and increased awareness of physical health generally. Residents also reported a sense of empowerment. Staff were highly engaged and inspired to adjust the physical surroundings of the unit to assist the residents. They expanded the smokefree outside areas and made plans to become totally smokefree.

Devon Partnership Trust will go on to repeat the programme and plan to extend the service in their weekly clozapine clinics, thus reaching around 4,000 mental health services users a year with harm reduction messages.

Prisons

The Smokefree Devon Alliance Co-ordinator continued to be a part of a Smokefree Prisons Working Group set up to prepare all three prisons in Devon (Dartmoor, Channings Wood, Exeter) to be part of the Smokefree Prisons pilot. In the year the working group designed a pathway based around a 'whole organisation' approach and this was presented (poster presentation) at the [UK National Smoking Cessation 2015](#) conference in Manchester in June 2015.

Priority Area 2 - Reduce illegal tobacco in the community

Cheap illegal tobacco undercuts the national taxation policy and is linked to funding serious, organised crime such as human trafficking and drugs. Working together in partnership will be our most effective way of tackling this problem. Illegal tobacco is more accessible in areas of deprivation and supports the cycle of ill health and poverty. Central to the Alliance objectives is to reduce availability of this kind of tobacco in our communities.



The Alliance commits to working together and providing the public with safe means to share information with the authorities about the availability of illegal tobacco and is committed to working in partnership to make a difference in this area. Key partners that work in this field include HMRC, the Devon and Somerset Trading Standards Service, Devon & Cornwall Police, community safety partnerships, health practitioners, the local stop smoking service,

the local community, local businesses, Devon & Somerset Fire and Rescue and Environmental Health. Together they commit a solid approach to tackling this issue. Key to the partnership will be creating a local intelligence network and a full range of information about illegal activity and its effect on the community. The Alliance will also enable agencies to be clear about our communication with the public through effective and consistent messages to be shared across the whole Alliance.

Progress

Devon continued to support Smokefree South West's Campaign Against Illegal Tobacco by supporting their information stand in Exeter City Centre in July 2014. 567 members of the public were given information about the campaign on that one day alone. Twelve pieces of high quality intelligence information were also passed back to the enforcement authorities about alleged local illegal tobacco activity.

Intelligence gained from members of the public also led to an investigation into the activities of an Exeter man reported to be selling tobacco from his home to schoolchildren seen queuing at his door and purchasing it. A test purchase carried out by Trading Standards officers resulted in a sale of 3 tobacco pouches which led to a warrant being obtained and the man's home was searched. Officers found 43 pouches of HRT and 18 boxes of counterfeit cigarettes together with counterfeit DVDs and production equipment leading to a successful prosecution and a sentence of six months imprisonment, suspended for two years together with 150 hours of unpaid work to be carried out. In addition the defendant was required to pay £600 in costs and an £80 victim surcharge.



Trading Standards continue to work with partners on raising awareness of the problems that communities can suffer from the sale of illegal tobacco and is currently supporting a pop up shop in Tiverton giving community safety information on a range of themes including illegal tobacco.

Priority Area 3 - Protect children and young people from smoking and reduce the availability of tobacco to underage consumers

The Alliance recognises that starting to smoke is a decision of childhood as 84% of smokers start before the age of 19 years. The Alliance supports initiatives to help stop children and young people from starting to smoke and to find ways to help them stop as soon as possible if they have started. Starting young can lead to a lifetime of tobacco addiction and a three times increased likelihood of dying young due to their smoking behaviour. Millions of children and young people are exposed to tobacco smoke in homes and cars every day. The government's tobacco plan has an aim to reduce regular smoking among 15 year olds to 12% by the end of 2015.

There is little evidence to support smoking cessation initiatives amongst young people and it is generally agreed that prevention strategies are more successful. Efforts to stop children taking up smoking are less effective for children living in a smoking environment. Therefore reducing adult prevalence has a direct effect on children. However, there are a limited number of evidence-based prevention interventions to draw on and these are cited in NICE Guidance PH23: School-based interventions to prevent the uptake of smoking among children. Most of the regulations detailed below are also designed to help prevent the uptake of smoking amongst children.

Progress

Regulations

The Alliance continued to support the Smokefree Action Coalition in moving towards regulations on several measures that affect children. It responded to consultations as an Alliance and some key members personally responded to MPs and the Parliamentary under Secretary of State for Public Health. It endorsed the Department of Health consultation on the Age of Sale for nicotine inhaling products to the over 18s. The Commons passed the Smokefree (Private Vehicles) Regulations with a final vote of 342 for and 74 against. From 1st October 2015, it will be an offence for any person to smoke in a private vehicle with someone under the age of 18 present, and for a driver to fail to prevent smoking in a private vehicle with someone under the age of 18 present. This will be enforced by local authorities and the police. A preparation campaign is expected September 2015. Removal of tobacco displays in small shops became effective 6th April 2015.

Table 3 Progress on Regulations

<u>Regulations</u>	<u>Act</u>	<u>When will these changes come into effect?</u>
Point of sale display ban of tobacco in small stores not subject to Sunday Trading Laws.	Health Act 2009	6 th April 2015
Proxy purchasing of tobacco and nicotine products (such as electronic cigarettes)	Children and Families Act 2014	2015 (date TBC)
Age of sale for nicotine products (such as electronic cigarettes)	Children and Families Act 2014	2015 (date TBC)
Standardised packaging	Children and Families Act 2014	20 th May 2016 (provisional)
Smoking in cars with children	Children and Families Act 2014	2015 (date TBC)
Revisions under the European Union Tobacco Products Directive.	The European Union Tobacco Products Directive	From 20 th May 2016

Draft regulations for standard packaging were published in summer 2014 following Sir Cyril Chantler's review which reported that there was strong evidence to support the policy. The House of Commons voted overwhelmingly in favour of standardised packaging in March 2015. 367 MPs voted in favour of the measure and just 113 against. The regulations were approved by the House of Lords on 16th March and the measure will take effect in May 2016.

#MakeaNoise

Health Promotion Devon ran the second year of a bespoke Year 8 Peer Education Programme on tobacco. The aim of the programme was to make smoking less attractive to young people and increase their knowledge of tobacco harm to help reduce the uptake of smoking by young people in Devon.

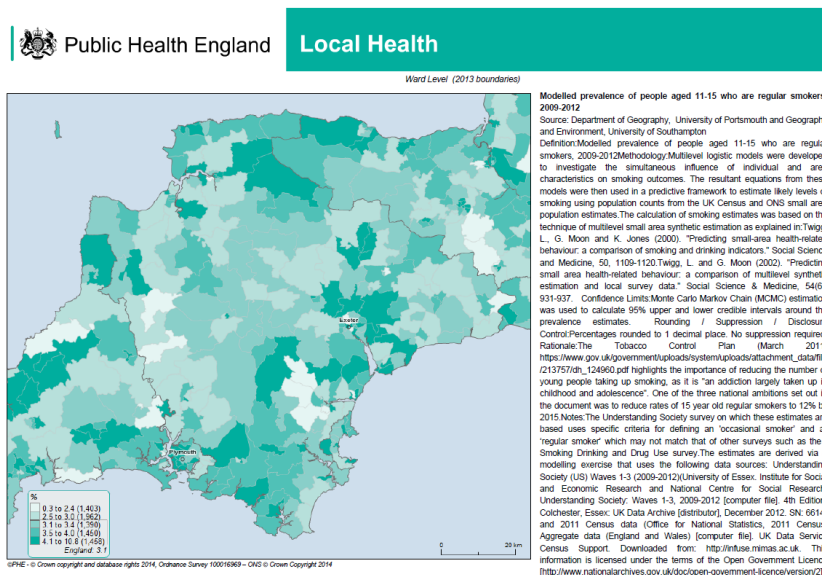


The Objectives of the programme were:

- increase the knowledge about tobacco harm by providing a wide variety of **information** on the production, distribution, marketing and use of tobacco
- increase the peer educators **skills** in raising the issue of smoking with their peers
- change the **attitudes** of young people about tobacco.

This programme was delivered to three schools in Devon – Ilfracombe Academy, Great Torrington Academy and St James School in Exeter. Schools for 2015-16

were chosen using the new [Public Health England](#) local map of Devon which has synthesised smoking rates in young people at a ward level.



Operation Smokestorm

This is a resource accessible to schools, live over the internet. It was developed in Hammersmith and Fulham and the evaluation report from the trial indicated that knowledge and awareness in relation to smoking had increased amongst London pupils after using the resource. Devon County Council offered this resource to secondary schools in Devon and three schools took up the opportunity – Ilfracombe Academy, Colyton Grammar and Great Torrington Academy. At the time of writing one evaluation was received from Ilfracombe. It states that the resource was easy to use, enjoyable for the pupils and their knowledge increased 'a lot'. They would like to use the resource again.



Toxic Tobacco Truths

Toxic Tobacco Truths is a branded and durable loose leaf folder of lesson plans and a DVD. It provides six lessons focussing on the wider issues surrounding tobacco. Not all the lessons need be used. It addresses all three influences on smoking uptake: the individual, the personal environment and the social and cultural environment. Research has shown this approach is successful for tobacco education. It also takes a social norms approach to smoking. The unit embeds key concepts and processes from the PSHE education programme of study and provides links to other topics in the curriculum.

This resource was offered to secondary schools in Devon and sent to eight schools that requested it. These were Colyton Grammar, Great Torrington Academy, Honiton Community College, Ivybridge Community College, Sidmouth College,

South Dartmoor Community College, Ilfracombe Academy and The Kings School. At the time of writing one school completed the evaluation and reported it was well received.

Other

The Children's Centres project mentioned on page 17 contributes to this priority area.

Priority Area 4 - Reduce smoking in pregnancy

Smoking in pregnancy can cause increased risk of miscarriage, stillbirth, preterm birth and low birth weight. It has been found to increase infant mortality by about 40% and is 1.5 times higher in women in the manual workers group than the population as a whole. It is nearly three times higher among mothers aged under 20 compared with rates for all pregnant women.



In Devon, key areas for development to reduce inequalities around smoking in pregnancy are as follows:-

- Accurate data capture mechanisms to record smoking prevalence at booking and delivery
- Training programmes for brief intervention to enable midwives to provide an intervention and refer to stop smoking services
- Maternity services should achieve compliance with [NICE guidance PH26](#).

Generally there are around 6,800 women giving birth in Devon (2013/14), of whom 12.2% are estimated to be active smokers (Local Tobacco Control Profile February 2015) The national average is 12% and is declining year on year. National figures are likely to be under-representative as they rely on accurate self-reporting of smoking status and as Trusts improve their recording, the rate tends to rise.

Progress

Maternity services

In March 2014, a full time specialist stop smoking midwife post was commissioned by Devon County Council in the Royal Devon & Exeter hospital to drive forward compliance with NICE Guidance. Carbon Monoxide monitors were provided for all community midwives to enable brief intervention at booking.

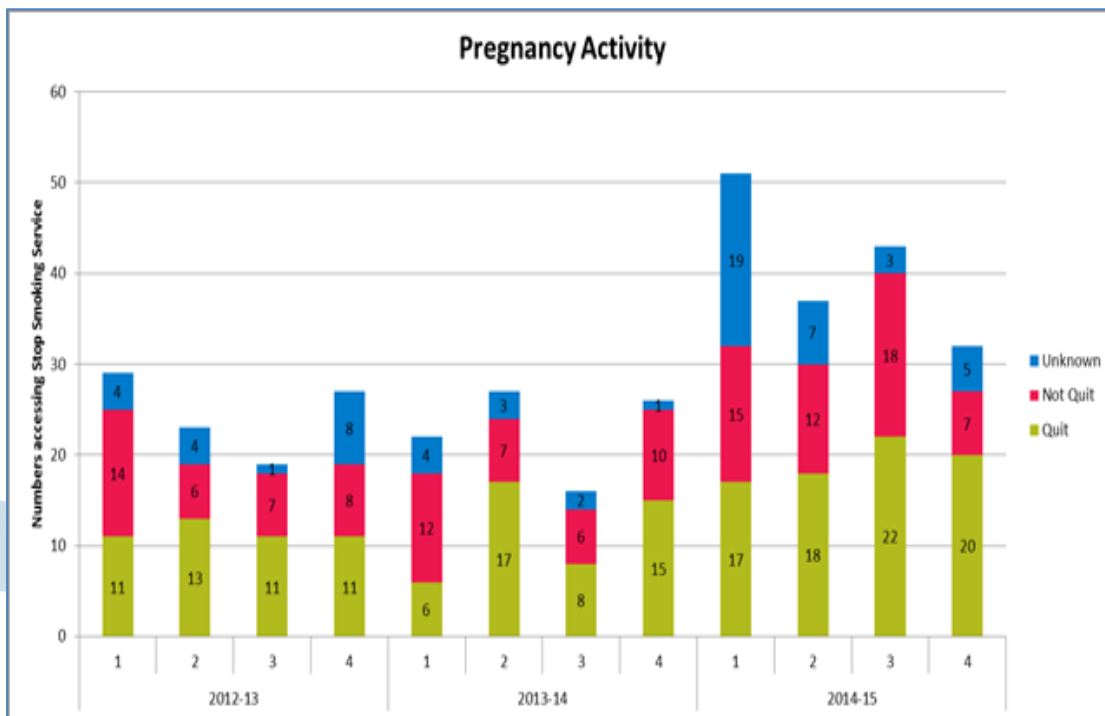
This would enable:

- carbon monoxide reading at booking
- offer of appointment with the specialist stop smoking midwife
- Follow-up appointments where smoker engages with service.

- Recording of smoking status at key points in the pregnancy
- Engagement with partners to quit smoking
- Advice on smokefree homes

In September 2014 a similar post was put in place in North Devon Healthcare Trust. These posts together have increased engagement with pregnant women that smoke. See Table 4 below.

Table 4. Timeline of all pregnancy SSS activity (including primary care)
Source: Public Health Intelligence Team, Devon County Council



Community midwives are now carrying out CO monitoring at booking and referring to the stop smoking midwives. Compliance with NICE Guidance PH26 has been achieved. .

The number of pregnant women in Devon setting a quit date in 2014/15 was 157, up 72% from the same point in 2013/14. (Source: HSCIC)

The stop smoking service midwives are also able to carry out home visits and help partners quit. They also promote smokefree homes. Tables 5 and 6 below show the number of women and partners they have personally supported.

Table 5. Pregnant women supported by the SSMs 2014-15

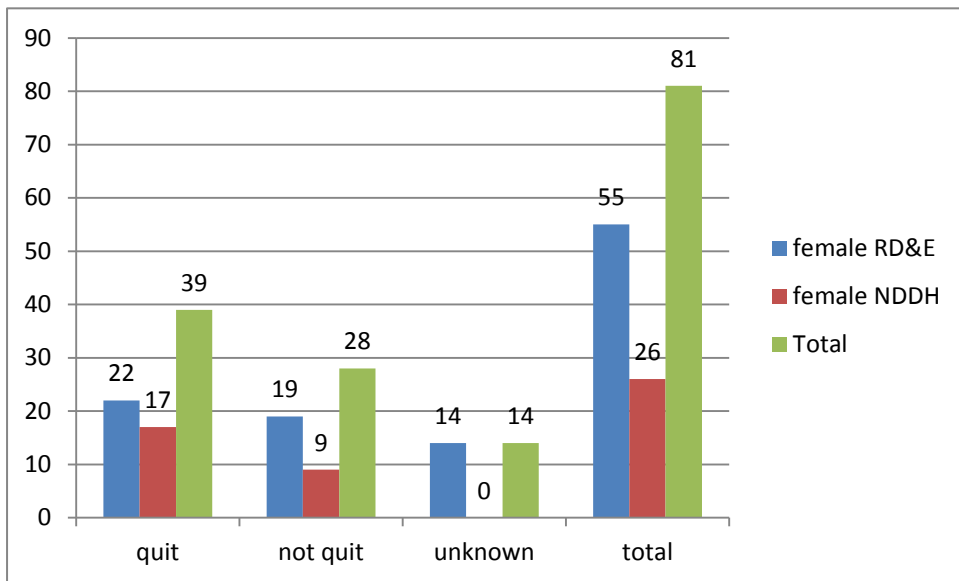
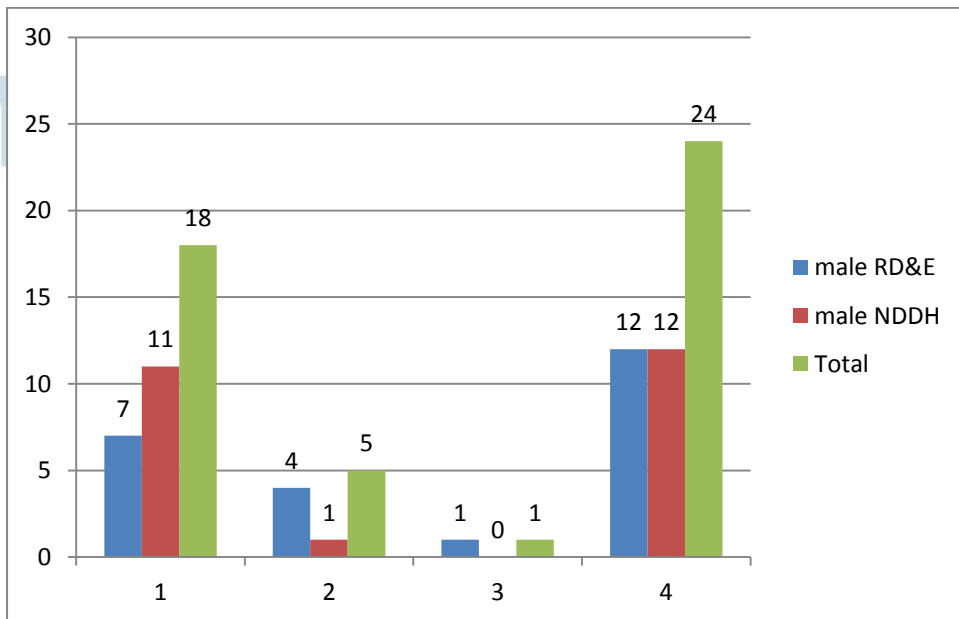


Table 6. Partners supported by the SSMs 2014-15



There are also promising early results regarding numbers of pre-term births and low-birthweight babies.

Other

The Children's Centres project mentioned on page 8 contributes to this priority area.

Priority Area 5 - Normalise a smokefree lifestyle

Smokefree legislation has made public places smokefree. It is important that the public sector leads by example, displaying to others the best of policy and implementation of policy. Now that buildings are smokefree, there is a move to promote smokefree outside leisure sites.

The South West became the first region in the country to have a smokefree outside space when Millennium Square and Anchor Square in Bristol became signed smokefree outdoor areas.

Progress

Local progress

Smokefree play parks have been rolled out across most of Devon now with signage being placed in East Devon, Mid Devon, South Hams, Exeter and Teignbridge. North Devon and Torridge will consider this proposal at their Health & Wellbeing meeting in July 2015.

Press Release East Devon

Play areas across East Devon are signing up to a voluntary code asking people not to smoke near children. In all, 37 play areas will be covered by the new code developed by Smokefree South West and East Devon District Council, using special signs designed by Smokefree South West.

Helen Wharam, the district council's new Public Health Projects Officer,

said: "We're working across East Devon to help protect future generations from the effects of tobacco and from taking up the habit of smoking. Children learn from imitating the adults around them, so children who live with smokers are more likely to become smokers themselves. Research suggests that reducing child exposure to smoking decreases the uptake of the habit amongst young people in the long term".

Launching the scheme at a play area in Littleham, Exmouth, on Thursday (20 November), Councillor Peter Sullivan, East Devon's Health and Wellbeing Champion, said: "Our parks help East Devon's residents live active, healthy lifestyles. We're proud to be actively discouraging smoking around children in our play areas, helping to reduce the number of young people who smoke and at the same time reducing litter in the parks".



Smokefree Children's Centre Roll-out

The Smokefree Children's Centres project piloted in 2013-14 was rolled out across the county. This was a 'whole organization' approach to smokefree. The approach

enabled staff from the Centres to engage with parents to get the message across to them that a smokefree lifestyle is beneficial for them and their children. This programme was an excellent example of partnership working between Smokefree South West, Devon County Council and children's centres. It gained a CLear Award for Excellence in 2013-14. The programme included development of:

- A DVD and training programme
- An online training programme
- A smokefree policy
- Bespoke signage for smokefree sites for childrens centres
- Referral pathways to stop smoking services
- Information on smokefree sites and smokefree homes.

Smokefree signage was delivered and installed in 22 sites and 169 childrens centre staff were trained in brief advice, referral to local stop smoking services, and the benefits of smokefree homes.

Smokefree homes

The work done by the stop smoking midwives detailed in Priority 4 also contributes to this priority through their work on smokefree homes. A small audit has shown that 75% of their clients (RD&E) have made a behaviour change and made their home smokefree whether they have successfully quit or not.

National progress

The Alliance supported the Smokefree Action Coalition in its consultations on draft Regulations for standardised packaging June – August 2014. A YouGov poll in March 2014 showed that 65% of people in the South West supported standard packs. It's estimated that more than 200,000 children experiment with smoking every year and part of the attraction is the highly-designed and market-tested packaging designed to lure in new generations of smokers.

Priority Area 6 - Support smokers to quit

The Alliance strongly supports the work of the local NHS Stop Smoking Service and the help they can give to people wanting to stop smoking. It recognises that nationally less than 6% of the smoking population access NHS stop smoking services. However, quitters using NHS services are four times more likely to succeed than without support and no other method of quitting can match this success rate. Nationally, numbers of smokers accessing stop smoking services has been falling since 2011-12. Success rates remain static at around 50%.

The Health & Social Care Information Centre has ceased mandatory collection of stop smoking service data but most areas in the south west continue to submit on a voluntary basis, including Devon.

Progress

Stop Smoking Services

In 2014/15 the Devon Stop Smoking Service has reached 4,432 smokers – that's roughly 4% of the local adult smoking population. This is 17%% lower than 2013/14, when 5,324 smokers had set a quit date. The quit rate remained broadly static, however, at 49%(2,181 quits).

Training

Sixty-nine health professionals attended level 2 stop smoking service adviser training. These included:-

Primary Care	23	school nursing	2	Other	6
Pharmacy staff	11	Midwives	3	Health Promotion Devon	5
Dental staff	3	Military	2	Westbank & associates	16

Over 50 individuals attended face to face brief advice training, enabling them to raise the issue with smokers. These were mostly primary care staff.

Campaigns

Stop smoking campaigns run in the year are detailed in Priority Area 7.

Priority Area 7 - Carry out marketing and communication programmes

The Alliance seeks to take advantage of Public Health England national campaigns and regional campaigns led by Smokefree South West. Locally all initiatives follow these themes. This creates a consistent, coherent and coordinated communications strategy.

Progress

Several campaigns were supported throughout the year. These included:

New Year Quits

Two campaigns were supported in the New Year.

1. Public Health England Health Harms Campaign

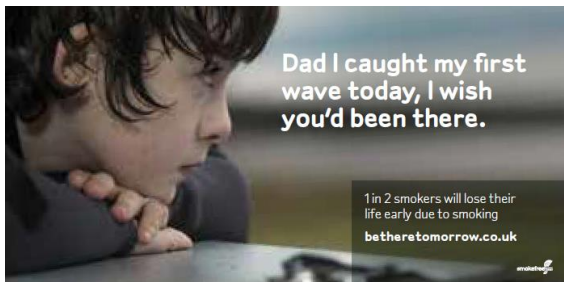
This national campaign was uplifted by Public Health by publicising to staff, the public and partners the full range of Smokefree support – including face-to-face help



and advice, the Smokefree app, Quit Kit, email and text programmes. It focused on the physical effects of smoking.

Devon ran a social media campaign ran throughout this period using key time points such as Valentine's Day, Easter Day and No Smoking Day.

2. Smokefree South West Regional Be There Tomorrow campaign Phase 2



This campaign highlighted the emotional aspects of smoking by showing special moments in life that 1 in 2 smokers who don't stop early enough are likely to miss out on by dying early from their habit. Devon produced a separate leaflet for each District. The leaflet listed every single point in the District that a smoker could go for local NHS Stop Smoking Advice. This

might be the specialist team, a pharmacy, their GP, or dental surgery. It gave the public complete choice over when and where they could access the stop smoking service in the county's large and mainly rural area.

The leaflets were used across all smoking campaigns running in January to March. They were sent to the following points of contact:

- GP surgeries
- Public health nurses
- Childrens centres (44)
- Pharmacies (40)
- Libraries (50)
- All dental practices (83).

No Smoking Day – 2015 national focus on mental health

Alliance members promoted No Smoking Day in March and the Cut Down to Quit Pilot (see page 9) was planned to coincide with No Smoking Day. This gained online coverage with Healthwatch and [Devon Partnership Trust](#).

Stoptober

Once again, this popular national campaign was widely supported using a wide range of partners. These included libraries, GPs, pharmacies, dentists, hospitals and children's centres. The national Stoptober Roadshow came to Exeter and the Comedy Brothers were supported by Health Promotion Devon at their city centre event. As many as 174 smokers pledged support on the day and signed up for the Stoptober App.



Public Health England reported that by the end of the campaign, 2,744 people in Devon had signed up to Stoptober either in person, on the web or via the Stoptober App.



Illegal Tobacco

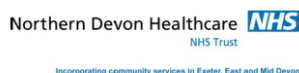
This Smokefree South West campaign was uplifted by the Alliance. Trading Standards carried out work which is detailed on page 9.

The “Tackling illegal tobacco” advanced toured Devon from Sunday 6th to Monday 14th July, and was seen in Marsh Barton industrial estate Exeter; Sowton Industrial estate Exeter, Barnstaple Retail Park and Axminster.

To mark World No Tobacco Day (Sun 31 May) Public Health and Trading Standards across Devon and Somerset highlighted their work against the [sale of illegal tobacco](#) products in communities.

Newsletters and Briefings

The Alliance produced four newsletters and several briefings in the year to inform the wider membership of the Alliance on smoking cessation and tobacco control matters.



APPENDIX 1

Membership of Smokefree Devon Alliance Steering Group 2014-15

Name	Organisation	Representing
Dr Phil Norrey (Chair)	Chief Executive Devon County Council	Devon County Council
Lesley Thomas (Co-ordinator)	Public Health Programme Manager (Tobacco Control)	Alliances
Dr Virginia Pearson	Director of Public Health Devon County Council	Public Health
Peter Ashton	Vice Chair, Federation of Small Businesses	Business
Denise Dearden	Project Officer, Trading Standards, DCC	Trading Standards
Alan Coxon	Community Safety Prevention Manager Devon & Somerset Fire & Rescue Service	Devon & Somerset Fire & Rescue Service
Darren Bolt	HIMP Exeter	Prison Service
Dr Mike Slot	GP, Sid Valley, Devon	Local Medical Council and NEW Devon CCG
Emma Herd	Senior Commissioning Manager	South Devon & Torbay CCG
Kevin Henman	Head of Youth Service DCC	Youth Service
Paul Nicholls	Food, Health and Safety Manager Environmental Health	Environmental Health
Greg Price	Stop Smoking Service Manager, NDDH	Stop Smoking Service
Lynne Jeary	Modern Matron, Devon Partnership Trust	Mental Health
Prof David Halpin	Consultant Physician, Respiratory Medicine, Royal Devon & Exeter NHS Foundation Trust	Respiratory Health
Therese Chapman	Lead Midwife, Public Health, NDDH	Midwifery
Rachel Campbell	Public Health Specialist	Public Health England Health & Justice
Nicola Glassbrook	Senior Public Health Officer, DCC	Health Inequalities
Greg Price	Stop Smoking Service Manager, North Devon Healthcare Trust	NHS Stop Smoking Service
Tania Skinner	Childrens Centre Advisor, S&W Devon Locality	Children's Centres
Justin Parsons	Service Development Manager British Lung Foundation	Voluntary services
Rachel Campbell	Public Health Specialist, Health & Justice	Health and Justice
Lucy Crystal	Young People's Project Delivery Manager, Smokefree South West	SFSW, Communications and Marketing
Julia Hulland	Senior Marketing and Communications Officer, DCC	Communications and Marketing
Philip Sanders	Elected Member Devon County Council	Members
Russ Moody	Health Improvement Manager, Public Health England	PHE