



**Nottingham &
Nottinghamshire**
Smoking & Tobacco
Alliance

Nottingham & Nottinghamshire Smoking & Tobacco Alliance

Draft Delivery Plan 2025-28

Nottingham and Nottinghamshire Smoking & Tobacco Alliance (NNSTA)

Section 1: Context and Background

The Nottingham & Nottinghamshire Smoking & Tobacco Alliance is a local response to a national ambition to achieve the country's first smoke-free generation. The Alliance was established in 2022. It brings together partner organisations from across a wide range of disciplines to work towards eliminating tobacco-related harm to create a smoke-free generation for Nottingham and Nottinghamshire by 2040.

The Alliance has a clear, shared ambition *to see smoking amongst adults reduced to 5% or lower by 2035 across Nottinghamshire and Nottingham City. Further to this, we want to make the harms of smoking and subsequent health inequalities a thing of the past for our next generation such that all of those born in 2022 are still non-smokers by their 18th birthday in 2040.*¹

Fewer people in Nottingham and Nottinghamshire smoke than ever before, but smoking remains the leading cause of preventable ill health. That is why reducing smoking and tobacco harm is recognised as a key objective within both our Joint Health and Wellbeing Strategies.

Smoking remains one of the greatest drivers of poor health and inequality across Nottingham and Nottinghamshire. While overall prevalence has declined, the burden of tobacco is not evenly shared. The ASH Inequalities Dashboard (2025) shows that smoking is concentrated in our most disadvantaged communities and among people living with poor mental health or social disadvantage.

In Nottinghamshire, around 10% of adults smoke; equivalent to more than 67,000 people. In Nottingham City, the proportion is almost double, with 18.2% of adults, nearly 48,000 people, smoking. While this represents a modest reduction from previous years, the city continues to lag behind regional and national averages.

The gap widens further in communities where disadvantage is most acute. Among adults in routine and manual occupations, prevalence rises to 17.4% in the county and an alarming 28.4% in the city. Smoking is also deeply entrenched among people with mental health needs: almost a quarter of those with long-term mental health conditions smoke, while nearly half of adults with serious mental illness in Nottingham City are smokers.

The majority of people in treatment for substance misuse also smoke, with rates as high as 86% among those in treatment for alcohol or non-opiate misuse in Nottinghamshire. Smoking is also deeply entrenched among people with mental health needs: almost a quarter of those with long-term mental health conditions smoke, while nearly half of adults with serious mental illness in Nottingham City are smokers.

Smoking in pregnancy remains significantly higher than the national average, with more than one in 10 women in Nottingham and Nottinghamshire smoking at the time of delivery. Although rates have edged downwards, progress is too slow to greatly close the gap with the England average.

The health impacts are stark. Nottingham records 2,370 smoking-attributable hospital admissions per 100,000 people, far higher than the England average of 1,680. This rate has fallen slightly since 2019/20 but remains well above national levels. People in Nottingham are almost twice as likely to be admitted to

hospital in an emergency for COPD. Children in Nottingham and Nottinghamshire were admitted to hospital for asthma at around the same rate as the national average, however there is still important work to do to reduce avoidable admissions.

The wider consequences of tobacco extend well beyond health. Smoking pushes households further into poverty: nearly a third of all smoking households in the East Midlands fall below the poverty line once tobacco expenditure is considered. In Nottingham County this affects more than 19,000 households and, in the City, more than 11,000 households. Smoking also impacts employment, with around 5,000 people across city and county estimated to be out of work due to smoking-related illness – a figure that has remained broadly stable.

Children are heavily affected. Over 67,000 children locally live in smoking households, where they are more likely to experience respiratory illness and be exposed to smoking role models. Each year, hundreds of children in Nottingham and Nottinghamshire take up smoking, perpetuating cycles of addiction.

The financial toll on society is vast. Locally, consumers spend an estimated £262 million a year on tobacco products. The economic cost of premature deaths attributable to smoking is calculated at £412 million in Nottinghamshire and £255 million in Nottingham. Productivity losses amount to more than £500 million annually, while smoking adds significant pressures to health and social care services; costing the NHS around £35 million a year locally and social care a further £288 million.

Taken together, these figures illustrate that tobacco remains one of the most pressing challenges for our health and wellbeing system. Despite positive changes since the beginning of the last delivery plan, inequalities persist and there remains some way to go to achieve our vision. At the same time, new challenges such as vaping among young people risk undermining gains made. Smoking not only harms individuals but also undermines family stability, deepens poverty, widens health inequalities, and places a major financial strain on public services and the wider economy.

The remit of the Alliance is to take a whole-systems approach to continue to drive the work forward.

Strategic partners of the Nottingham & Nottinghamshire Smoking & Tobacco Alliance agreed to adopt the WHO Framework Convention on Tobacco Control MPOWER Modelⁱⁱⁱ when it was established in 2022. As a leading model for tackling tobacco control it was felt this would best suit the needs of the Alliance.

- M** Monitor tobacco use prevention policies
- P** Protect people from tobacco smoke
- O** Offer help to quit tobacco use
- W** Warn about the dangers of tobacco
- E** Enforce bans on tobacco advertising
- R** Raise taxes on tobacco

The MPOWER model is a public health approach. It is a framework developed by the World Health Organisation to help counties implement evidence-based tobacco control policies. MPOWER aims to reduce tobacco use by addressing various aspects, including monitoring, protection, quitting assistance, warning, enforcement of bans and raising taxes. The public health approach focuses on preventing and controlling diseases and health risks in a population.

Four areas for improvement were identified by the Alliance for Nottingham and Nottinghamshire by using the CLearⁱⁱⁱ process (CLear - Challenge, Leadership and Results, an evidence-based improvement model used to assess local tobacco control activity). These have been developed into 4 Delivery Themes:

Delivery Theme 1: **Helping people to quit smoking**

Delivery Theme 2: **Effective regulation of tobacco products**

Delivery Theme 3: **Protecting people from secondhand smoke**

Delivery Theme 4: **Prevention & Engagement with Children & Young People**

In addition to the Delivery Themes there are three cross-cutting themes including:

- Governance
- Effective communication
- Tobacco Declaration

Actions within the delivery themes were informed by the findings of the CLear process and by the recommendations of the Joint Strategic Needs^{iv} Assessment for Smoking and Tobacco Control for both Nottingham (2019) and Nottinghamshire. (2020)

Policy drivers- To implement effective interventions, manage our tobacco control work and review progress, the Alliance have designed our thinking and actions on various national and local smoking and tobacco related policies. National policy drivers include the

- The Green Paper (2019)^{vi} published by the national government about prevention of ill health across the board.
- The APPG on Smoking and Health (2019)^{vii} published in response to the Secretary of State for Health and Social Care's policy paper 'Prevention is better than cure' and ahead of the Department for Health and Social Care's
- The Royal College of Physicians Report^{viii} Smoking & Health 2021 A coming of age for Tobacco Control
- The All-Party Parliamentary Group (2021): Delivering a smokefree 2030. Recommendations for Tobacco Control^{ix}
- NICE guideline NG 209 on Tobacco: Preventing uptake, preventing uptake, promoting quitting and treating dependence^x
- The Khan Review June 2022 Making Smoking obsolete^{xi}
- Smoke Free by 2030- The 10 high impact actions for local authorities and their partners (ASH, 2020)^{xii}
- NHS England (2022) Tobacco Dependency Programme^{xiii}
- DHSC (2022) Stopping the start: our new plan to create a smokefree generation^{xiv}
- HM Revenue & Customs (2024) (Stubbing out the problem – a new strategy to tackle illicit tobacco)^{xv}

- Tobacco & Vapes Bill – Creating a Smokefree UK^{xvi}
- APPG (2025) Roadmap to a Smokefree country. No one starts; Everyone Stops No one profit in tobacco^{xvii}.
- Department for Environment, Food & Rural Affairs (2025) Single Use Vapes Ban^{xviii}

Local policies include:

- Nottingham & Nottinghamshire ICS health inequalities strategy 2020 -2024^{xix}
- The Nottinghamshire Plan: Our plan for a healthy, prosperous and greener Nottinghamshire 2021-2031^{xx}
- Nottinghamshire Joint & Health & Wellbeing Strategy^{xxi}
- Joint Health & Wellbeing Strategy for Nottingham^{xxii}

Section 2: Review of progress: Nottingham and Nottinghamshire Smoking & Tobacco Alliance - Delivery Plan Impacts 2022 - 2025

The Alliance is now fully established, with clear terms of reference, a shared vision, and a three-year delivery plan being implemented by partners. Communications have strengthened through the launch of a joint brand, shared channels, and collaborative campaigns such as Stoptober and mental health and smoking. Agreement on a consistent position regarding e-cigarettes is a positive step, though detailed communication plans and wider partner engagement is still required. While the Tobacco Declaration itself has been refreshed, further work is needed to streamline processes and make take-up easier.

Theme 1: Helping vulnerable people to give up smoking

Collaboration between providers has improved, with new referral pathways across some maternity, secondary care, and community services. Development of a harm reduction pilot with Thriving Nottingham, Your Health Notts, Notts Healthcare Trust, and Public Health, making Nottingham/shire one of the first areas to adopt this approach, there is also the swap to stop scheme that has been successful. Active engagement in the Theme 1 delivery group has driven progress. However, inconsistent in-patient to community pathways, prescribing barriers, and reaching the most vulnerable are areas needing action.

Theme 2 - Effective regulation of tobacco products

Under Theme 2, a dedicated delivery group has been established, new resources for frontline staff developed, and a stronger Police and Trading Standards partnership has developed to tackle illegal sales. Awareness of illegal and underage sales has increased through these resources. However, barriers to reporting and sharing intelligence persist among partners and residents, requiring ongoing work.

Theme 3 - Protecting people from second-hand smoke

A social housing audit and co-design with providers have developed Smokefree Homes initiatives, with four housing providers participating. Smokefree workplaces and events, including school engagement through child-designed posters, have also progressed. Behavioural insight research has informed these activities. However, expansion to more housing providers and stronger partner engagement are needed to embed change across the system.

Theme 4 - Prevention and engagement with children and young people

Behavioural insight research, a dedicated delivery group, and school-based resources have strengthened prevention work. Vaping prevention is a priority, with young people actively shaping campaigns and messaging. However, increasing school participation and wider use of resources is needed to maximise impact and prevent uptake of smoking and vaping among young people.

Appendix 1 contains a detailed review of the last delivery plan 2022-2025 has been reviewed with an assessment of outcomes / impacts of work undertaken by the Alliance over the last 3 years.

Section 3: Nottingham and Nottinghamshire Smoking & Tobacco Alliance – DRAFT Delivery Plan 2025 – 2028

Context: This document focuses on the action plan for our 4 key delivery themes for the next 3 years, monitoring of the actions and details on system working. It is a live document which will be periodically reviewed every 12 months.


The Delivery Plan 2025-2028 will need to be flexible and adaptable in the light of upcoming changes to legislation which will change the operating context.

The Delivery plan has been informed by current members of the themed delivery groups, the Challenge Leadership and Results (CLear) process and by the recommendations in the Joint Strategic Needs Assessments on Smoking and Tobacco Control for Nottingham (2019) and in Nottinghamshire (2020)

Some of the actions from this Delivery Plan have been carried forward from the previous Delivery Plan (2023-2025)

<i>Theme</i>	<i>Actions</i>	<i>Proposed lead organisation</i>	<i>Outcome</i>	<i>Evidence</i>
Cross cutting themes				
Communications (Carried forward from Delivery Plan 2023-2025)	Launch and raise awareness of the Alliance website to partners and the public	Nottingham City Council	Website launched by April 2025 (Y1) Increased awareness and engagement with Alliance activities among partners and public	Monitoring of website use and engagement (Y2): Number of partner organisations linking to or sharing website content Engagement metrics such as number of website visits downloads of resources, or enquiries/contact submitted via the website Feedback from partners or surveys showing increased awareness of Alliance activities

	<p>Communications campaigns focused on:</p> <ul style="list-style-type: none"> • Improving awareness of new legislation • Dispelling myths: vaping and smoking • Dispelling myths: nicotine and mental health • Consistent messaging • Reporting Illegal Tobacco and Underage Sales • Smoking in pregnancy 	<p>Public Health teams to coordinate. All Alliance partners to contribute through consistent messaging and reinforcement</p>	<p>Increased awareness, reduced myths, consistent messaging, and greater reporting of illegal/underage sales</p>	<p>Campaign reach and engagement metrics</p>
	<p>Enhance communication between partners to ensure all tobacco control activity is effectively promoted across the Alliance</p>	<p>All</p>	<p>Increased understanding of partner activities, identification of gaps, partnership approach to addressing issues.</p> <p>Increased contribution to the Alliance newsletter and agenda items</p>	<p>Mapping of partner activities Records of newsletter contributions and meeting agendas</p> <p>Document joint decisions /actions to address identified gaps</p>
<p>Using research to support the Alliance's work</p>	<p>Identify opportunities across the Smoking and Tobacco Alliance workstreams for potential academic partnership</p>	<p>Universities</p>	<p>Development of joint research proposals, evaluations and publications and integrate these into Alliance activities</p>	<p>Document identified opportunities and collaborations</p> <p>Joint outputs – such as evaluations/reports</p>
	<p>Keeping abreast of product changes and adapting to the landscape</p>	<p>All</p>	<p>Alliance activities remain relevant and responsive to emerging products and needs</p>	<p>Adaptation of local services and messages aligned to development in nicotine and tobacco-based products</p>

Monitoring and evaluation	Explore the inclusion of a monitoring framework, with an emphasis on priority populations		Better understanding of how priority groups are engaging with services	Data with selected metrics on population groups
Multi-agency partnership working	Conduct an assessment of the role and success of the Smoking and Tobacco Alliance as a System Leadership Group. See embedded word doc	Public health	Demonstration of the Alliance's effectiveness  Diagnostic checklist for system leadership	Conduct an assessment of the role and success of the Smoking and Tobacco Alliance as a System Leadership Group – complete evaluation plan in Y1 and results in Y2
	Engage local businesses to support stronger pledges under the Smoking and Tobacco Declaration.	Public Health	More local businesses making robust, aligned pledges.	Number of businesses engaged through meetings, surveys, or workshops. Number and quality of pledges signed or updated. Feedback from businesses on support provided and changes made to their pledges.
	Strengthen Alliance governance and links with ICB/NHS structures	Public Health	Improved alignment with NHS priorities	Documented decisions with continued representation at the alliance from ICB and NHS partners
Theme 1: Supporting residents to achieve a smoke-free future				
Theme 1	Actions	Proposed lead	Outcome/ impact measures	
	Pilot and evaluate a tobacco harm reduction approach starting with an SMI cohort	ABL, NHT, Thriving Nottingham, Public Health, and	Increased opportunities for SMI patients to engage in smoking cessation	Evaluation report and subsequent business case

		University of Nottingham (UoN)		for expansion to other cohorts if appropriate.
	The creation of a Lived Experience Panel and/or engagement with key target groups to better understand their barriers to quitting smoking.	Public Health	A better understanding of how to make SSS equitable and accessible to key populations.	Lived Experience reports and case studies presented to the Smoking & Tobacco Alliance
	Exploration and roll-out of new community venues for smoking cessation (e.g. workplace groups, new community venues, pharmacies and other sub-contracted providers) (Action carried forward from Delivery Plan 2023-2025)	Providers with support from public health	Increased capacity and/or access to smoking cessation leading to an increased number of quit dates set.	Annual provider impact reports to the Smoking & Tobacco Alliance; and Case study examples
	Identifying groups to target (i.e. those groups that are underrepresented in referrals) <ul style="list-style-type: none"> • Using results of EIA / HEA to inform targeting • Use prevalence data • Neighbourhood approaches • Priority groups • Alternative access methods to support delivery e.g. pharmacies, vape shops 	Providers	Increased referrals and engagement of underrepresented groups	Record of outreach Mapping of areas targeted Referral and uptake data
	Use audit findings and service data to identify and adopt best practice and stronger models of support for women smoking in pregnancy across Nottingham and Nottinghamshire (NUH, SFH, ICB, PH) Promote collaborative working and smooth referral pathways between secondary care and community SSS. Strengthen SSS referral routes within LTC	Providers and ICB	Reductions in smoking in pregnancy due to increased access to support and success in stopping smoking during pregnancy.	Annual Service Impact Reports to the Smoking & Tobacco service including data on the number of pregnant women who set a quit date and the number who successfully quit.

	pathways, particularly as part of the development of Integrated Neighbourhood Working. (action carried forward from delivery plan 2023-2025)			
Theme 2: Effective regulation of tobacco products				
Theme 2	Actions	Lead	Outcome/ impact	
	Engage with organisations and individuals to better understand and act to break down barriers to reporting	Trading Standards	Develop and enact an action plan to break down the barriers identified.	An increase in community reports about illegal tobacco products.
	Inform partners and the public about changes in tobacco enforcement laws and monitor developments to adapt activities, including licensing, smokefree environments, and tobacco product regulations.	Trading Standards Local Authorities	Partners and the public understand new legislation, Alliance activities are updated to remain compliant and effective	Monitoring of activity in line with legislation Updated guidance
	Continued commitment to fund and renewal of agreement for seconded Police Officer	Police Trading Standards	Continued support for enforcement of tobacco regulations Strengthens our working partnership with Trading Standards	Renewal of funding and employment of Police Officer.
	Establish an annual horizon-scanning review process for new nicotine products in conjunction with providers of CYP vaping services	Trading standards Police Environmental Health Public Health Local Authorities	The Alliance stays aware of new products and can respond quickly to emerging trends affecting young people	Updates to guidance or campaigns based on findings
Theme 3: Protecting people from second-hand smoke				
Theme 3	Actions	Lead	Outcomes/ impact	
	Implement the Nottingham and Nottinghamshire smokefree homes project	County and City Public Health	Embedded promotion of smokefree homes and signposting to Integrated	Evaluation to measure uptake and impact.

	with potential to expand to other housing tenures.		wellbeing services, reduction in second-hand smoke exposure, expansion to other housing tenures	Housing provider, and tenant feedback. Distribution of resources, number of referrals made under the 'smokefree homes' reference to the IWS.
	Build on upcoming legislation with expansion of smokefree outdoor spaces including for example: <ul style="list-style-type: none"> • Smokefree events • Smokefree sidelines • Smokefree school gates and pick up point • Country parks/ parks/ playgrounds 	County and City Public Health	Greater promotion and recognition of smokefree environments, helping to protect children from second-hand smoke and normalising smokefree behaviour in public spaces.	Number of smokefree sites, events, or organisations involved (e.g., football clubs, teams, or leagues), alongside increased signage and social media promotion from partners.
	Develop and enact a local plan for the effective and sustainable enforcement of new smoke free spaces legislation.	Local Authorities / Hospital trusts/ Police	Smokefree rules are applied consistently across the city and county, with partners and the public informed and compliant.	Local enforcement plan in action, monitor compliance, partner and public feedback
	Embed smoking prevention messages into wider fire safety communications for relevant groups.	Fire Service	Increased awareness of the risks of smoking-related fires and promotion of quitting support through Fire Service messaging.	Record campaigns/ smoking messages, distribution of materials during home visits.
Theme 4: Prevention and engagement with children and young people				
Theme 4	Actions	Lead	Outcomes/ impact	
	Launch and learn from pilot programmes in Nottingham City and Nottinghamshire County for novel CYP vaping prevention and cessation services	Theme 4 Delivery Group / Schools health teams	Better understanding of what helps children and young people stop/ avoid vaping, with effective models that can be scaled up	Pilot evaluation reports, feedback from young people and providers, service uptake data

	Integrate Very Brief Advice/let's talk health in youth and early years settings.	Theme 4 Delivery Group / Youth Services/settings	Delivery of consistent advice on smoking and vaping to young people and families	Training records, staff feedback.
	Develop programme of activity for prevention and engagement with Looked After Children and Care Leavers	Theme 4 Delivery Group / Children's Social Care	Measures to be identified within action plan	
	Support Theme 2 actions to raise awareness of upcoming legislation, where legislation will impact on children and young people.	Schools' health teams and youth services/settings	Young people and families know about new laws and how they affect them	Engagement metrics (e.g. social media), feedback from CYP

Section 4: References

- ⁱ Nottingham & Nottinghamshire Smoking & Tobacco our long-term vision (2022) available from [43.114-Smoking-and-Tobacco-Control-Vision.pdf](#)
- ⁱⁱ MPOWER accessed 2/05/2025. Available from: <https://www.who.int/initiatives/mpower>
- ⁱⁱⁱ CLear Local Tobacco Assessment Tool Guidance for local authorities, public health bodies and the NHS on using ‘deep dive’ self-assessment tools to improve their tobacco control work. (PHE, 2014). Available from [CLear local tobacco control assessment - GOV.UK](#)
- ^{iv} Joint Strategic Needs Assessment Smoking and Tobacco Control Nottingham (2019) Available from : [Smoking and Tobacco Control \(2019\) - Nottingham Insight](#)
- ^v Joint Strategic Needs Assessment Tobacco Control Nottinghamshire (2020). Available from - [Nottinghamshire Insight](#)
- ^{vi} Green Paper on Prevention (2019) <https://www.gov.uk/government/consultations/advancing-our-health-prevention-in-the-2020s/713af73f-5588-4757-b643-ed940dcbc>
- ^{vii} APPG (2019) Delivering the Vision of a Smoke-free generation: Prevention is better than Cure. Available from [All-Party Parliamentary Group \(APPG\) on Smoking and Health \(2019\)](#)
- ^{viii} Royal College of Physicians (2021) Available from [Smoking and health 2021: A coming of age for tobacco control? | RCP](#)
- ^{ix} Royal College of Physicians (2021) Available from [Smoking and health 2021: A coming of age for tobacco control? | RCP](#)
- ^x NICE Guideline NG 209 (2021). Available from [Overview | Tobacco: preventing uptake, promoting quitting and treating dependence | Guidance | NICE](#)
- ^{xi} The Khan Report (2022) Making smoking obsolete. Available from [Making smoking obsolete](#)
- ^{xii} ASH (2020) Smoke Free by 2030 The 10 High Impact Actions [10-High-Impact-Actions.pdf](#)
- ^{xiii} NHS England (2022) Tobacco dependency Programme [NHS England » Tobacco dependency programme](#)
- ^{xiv} DHSC (2022) Stopping the Start Available from: [Stopping the start: our new plan to create a smokefree generation - GOV.UK](#)
- ^{xv} HM Revenue and Customs (2024 [Stubbing out the problem: A new strategy to tackle illicit tobacco - GOV.UK](#)
- ^{xvi} DHSC (2024) Tobacco & Vapes Bill. Available from [Tobacco and Vapes Bill: creating a smoke-free UK and tackling youth vaping factsheet - GOV.UK](#)
- ^{xvii} APPG (2025) Roadmap to a smokefree UK. No one starts Everyone stops No profit in Tobacco. Available from [The All-Parliamentary Group Roadmap to a Smokefree country: No one Starts Everyone Stops No profit in tobacco April, 2025](#)
- ^{xviii} DEFRA (2025) Single Use Vapes ban. Available from [Single-use vapes ban - GOV.UK](#)
- ^{xix} Nottingham & Nottinghamshire ICS health inequalities strategy 2020-2024. Available from [Notts ICS HI strategy 06 October v1.8](#)
- ^{xx} The Nottinghamshire Plan (2021) [The Nottinghamshire Plan: Our plan for a healthy, prosperous and greener Nottinghamshire](#)
- ^{xxi} Nottinghamshire Joint Health & Wellbeing Strategy 2022-2026. Available from [nottinghamshirejointhealthwellbeingstrategy2022-2026.pdf](#)
- ^{xxii} Joint Health & Wellbeing Strategy for Nottingham (2022). Available from [nottingham-city-joint-health-and-wellbeing-strategy-2022-25.pdf](#)

Appendix 1: Review of progress on Delivery Plan 2022-2025

<i>Theme</i>	<i>Actions</i>	<i>Lead</i>	<i>Outcomes / Impacts</i>	<i>Evidence</i>	<i>Limitations</i>	<i>Rag rating</i>
Cross cutting themes						
Governance	Set up Governance arrangements	City and County Public Health	Establishment of Alliance and its strategic and operational groups Functioning Alliance	Approved Terms of Reference Meeting attendance records Action logs and task assignments to delivery groups.	The ToR have been reviewed and updated March 2025	
	Develop vision and first three-year delivery plan	Public Health coordinated; Alliance partners contributed.	Shared vision and agreed delivery plan	Publication of vision. Publication of delivery plan. Regular updates to Strategic Group (notes of meetings)		
Communications	Alliance communications brand and channels	Gardiner Richardson commissioned to lead development	Launch of brand Launch of and continued use of social media channels	Use of branding assets (including logos) on partner activities. Partner contributions to newsletter, case studies.		
	Agreed position on e-cigarettes	All	Agreement to join East Midlands ADPH consensus statement	Consistent messaging aligned to position statement	Partner adherence to agreed position	
	Develop detailed comms plans	All	Agreement to comms plan Shared communications	Comms activities consistent with plans and toolkits. Comms leads group established	Partner engagement in campaigns - sharing and	Increased partner engagement in campaigns

			toolkits – one for each delivery theme Shared campaigns involving wider partners	Comms reports from partners Shared campaigns: Stoptober, illegal tobacco, mental health and smoking; smokefree cars	amplification of messages	and sharing of messages
Tobacco Declaration	Refresh the tobacco declaration	Public health	Refreshed Tobacco Declaration Participation of Alliance partners	Alliance partners signed up to Declaration and with Action Plans in place. Stocktake due April 2025. Consider revising the process to include a checklist to replace the need for an action plan.		Work in progress- revision of the process is being considered
Delivery Theme 1: Helping vulnerable people to give up smoking						
Theme 1	Actions	Lead	Outcomes/ impact	Evidence	Limitations	
Aim: Have a comprehensive offer of support for anyone who wishes to give up smoking and ensure that our most vulnerable communities have equity of access and outcomes.	Providers work together to strengthen collaboration	Providers	Provider group established and collaborating	Attendance records and action logs		
	Improved referral pathways	Providers	Maternity stop smoking pathway in place LTP pathway in place (secondary care) Self-referrals process	Number of referral pathways. Provider data on referrals (ABL and Thriving Nottingham) – routine monitoring as part of commissioning	Challenges within services /consistency of delivery / ICB barriers to prescribing	This work is ongoing.

			Transition between services City-County	Geographic spread of referrals (Mapping)		
	Increasing uptake	Providers	Harm reduction approach developed. Smokefree generation plans – expansion / additional capacity. Swap to stop expansion Workplace targeting initiatives Uptake by target groups: homelessness, substance users, SMI	Completed approach, with monitoring / evaluation plan. Provider records; returns to DHSC for use of SSSG - All routinely in place as part of commissioning Case studies.		
Delivery Theme 2: Effective regulation of tobacco products						
Theme 2	Actions	Lead	Outcomes/ impact	Evidence	Limitations	
Aim: Working together to reduce the access to illegal tobacco and having a city and county where retailer environment promotes good practice around	Forum for regular discussion and sharing of local intel	Trading Standards	Theme 2 Delivery Group established and collaborating	Action log from group meetings.		
	Encourage reporting of illegal sales	Trading Standards	Development of resources for front line workers Development of posters to encourage UAS and illegal sales reporting	Records of distribution of resources Consultation with CYP Delivery Group – focus group	Willingness to report from partners, perceived consequences	

illegal sales of tobacco and/or vaping product	Partnership between Police and Trading Standards to support enforcement	Police	Recruitment of Police officer to support work	Police officer input to enforcement activities		
Delivery Theme 3: Protecting people from second-hand smoke						
Theme 3	Actions	Lead	Outcomes/ Impact	Evidence	Limitations	
Aim: Creating smokefree places and reducing exposure to second-hand smoke	Examine potential targeting of social housing as a sector with high smoking prevalence	Public Health	Social housing audit Project development with codesign by social housing providers. Promotion of local services to social housing residents. Promotion of smokefree homes.	Completed social housing audit report. Records of engagement with strategic housing group. Results of pilot project – training evaluations. Engagement of 4 housing providers in co-design Records of Steering Group meetings and tenant feedback. Completion of project materials, implementation and evaluation plan.	Patchy levels of interest from housing providers	Work in progress / ongoing.
	Promote smokefree workplaces – extension to outdoor areas	City Public Health lead	Publication of smokefree toolkit	Completion of smokefree toolkit audits by Alliance partners	Partner engagement / interest in opportunity	
	Promote smokefree events	City Public Health lead	Piloting use of child-designed posters as a promotional tool	Schools participated in competition Records of poster use		

	Using local data to inform Theme 3 activity	CYP Delivery Group (in absence of Theme 3 group)	Promoting relevant school survey data findings. Use of behavioural insight findings. Design of activities in response.	Consultation with clinicians and CYP Health Network Activity plans approved by CYP Group. Evaluation metrics included.		
Delivery Theme 4: Prevention and engagement with children and young people						
Theme 4	Actions	Lead	Outcomes/ Impact	Evidence	Limitations	
Aim: To prevent children and young from starting to smoke in the first instance and breaking generational smoking patterns. Including regulation of products and underage sales, engagement, and de-normalising smoking.	Discover local attitudes to smoking and vaping in and for young people	Commissioned from Bluegrass Consulting / SHEU	Behavioural insight report (parents and young people findings) GUIN / SHEU surveys (young people's behaviours) Use of findings to inform activity.	Completed reports. Use of research within activities. Identification of true local social norms to inform interventions.	Willingness of CYP to engage	
	Establish forum for shared understanding	Public Health teams	Theme 4 group established	Terms of reference and action logs		
	Prevent smoking uptake by young people	Schools Health Hub / Achieve Well Team / Public Health team	Smoking prevention education offer to local schools Production of supporting materials for schools	Monitoring of INTENT programme. Publication of resource packs with supporting change logs and feedback collation.	School participation in INTENT programme	
	Prevent vaping uptake in young people	Public Health team	Production of resources	Publication of resources. Monitoring of distribution & evaluation plan (March 2025)		

			<p>Promote consistent messaging through system-level work and training Consultation with young people to inform production of assets and campaigns.</p> <p>Engagement with youth services</p>	<p>Addition of vaping content to INTENT following feedback. Conference / meeting schedule & feedback; examples of consistent message use. Feedback from young people used in development of further assets (e.g. social norms project, animation) Social norms posters / school feedback. Youth Service resources and feedback mechanism.</p>		
	<p>Raising awareness of upcoming legislation and what it means to CYP e.g. age of sale</p>	<p>Public Health teams, young people's services, community services</p>	<p>Production of Alliance engagement resources; conversations on social media / with young people for increased awareness</p>	<p>Social media posts and engagement monitoring</p>		