

**SCOTTISH MINISTERIAL WORKING GROUP ON TOBACCO CONTROL  
MINUTES OF MEETING HELD ON 5 JUNE 2019**

**Chair:** Mr Joe FitzPatrick, Minister for Public Health, Sport and Wellbeing

**Present:**

Mr John Lee, Scottish Grocers Federation  
Mr David Woodrow, National Federation of Retail Newsagents (Scotland)  
Professor Linda Bauld, University of Edinburgh  
Professor Amanda Amos, University of Edinburgh  
Mrs Sheila Duffy, ASH Scotland  
Professor Sally Haw, University of Stirling  
Mr Peter Cheema, Scottish Grocers Federation  
Mr Daniel Jones, British Heart Foundation Scotland  
Mrs Debbie Sigerson, NHS Health Scotland  
Mr George Dodds, NHS Health Scotland  
Ms Dawn Adamson, Society of Chief Officers of Trading Standards in Scotland  
Ms Anna Bennett, Young Scot  
Mr Craig Somers, Society of Chief Officers of Environmental Health in Scotland  
Dr Alison McCallum, NHS Lothian  
Ms Karen Gray, NHS Lothian  
Ms Tracy McGillivray NHS Lothian

**SG Officials:**

Mr Morris Fraser, Tobacco Control Team  
Mr Elaine Mitchell, Tobacco Control Team  
Mr Stephen Young, Tobacco Control Team  
Mrs Julie Landsberg, Health and Social Care Analysis

**Apologies:**

Dr Andrew Fraser, NHS Health Scotland  
Mr Adam Osprey, Community Pharmacy Scotland  
Mr Frank Toner, British Lung Foundation  
Mr Garrick Smyth, COSLA  
Professor Gerard Hastings, University of Stirling  
Mr Gregor McNie, Cancer Research UK  
Mrs Liz Sadler, Scottish Government  
Mr James Cant, British Heart Foundation Scotland  
Ms Moyra Burns, Scottish Health Promotion Managers  
Mr Paul Waterson, Scottish Licensed Trade Association  
Mr John Glen, Tobacco Control Team

## **ITEM 1: Welcome & Introductions**

1. The Minister welcomed everyone to the meeting and thanked Members for their contribution to reducing the harm caused by tobacco and that Ministers were particularly happy to see the continued focus of effort and the continued improvement in successful quits in areas where smoking rates are highest.
2. Members were asked to declare if there were any additions to the statements previously provided relating to Article 5.3. The Group indicated that there were no further changes to report since the previous meeting.
3. The Minister noted apologies and that the minutes of the last meeting of 27 March 2018 have been cleared in advance of this meeting, noting any additional comments should be forwarded to the Tobacco Control Team.

## **ITEM 2: Smoking Prevalence 2017**

4. Julie Landsberg gave a presentation to the group on Smoking statistics. A link to the presentation is attached for ease of reference.
5. In discussion the following points were made:
  - a) Smoking prevalence is down to 18% in 2017/18;
  - b) The deprivation gap has narrowed but rates remain 3 times higher in the most deprived areas than in the least;
  - c) Statistics show that 68% of smokers want to quit smoking.
6. Questions were asked around the fact that prevalence rates remain higher in Scotland and Northern Ireland. Morris Fraser explained that one element of this was that proportion of deprivation was higher in these nations. Another element was migration and the impact of ethnicity and culture. The smoking levels of different migrant populations varied and the migration patterns to Scotland and Northern Ireland brought with them some of the migrant populations with the highest smoking rates. We know from the Scottish Core Questions Survey for example that people from Poland are more likely to be smokers than people from many Asian countries, which have culturally lower rates of smoking.
7. In discussion, Professor Bauld advised that there is going to be a new data set on smoking available for Scotland shortly. This data set will be provided by the newly established SPECTRUM group, of which she is a Director. This will effectively extend the toolkit which provides monthly smoking data in England to top make this level of data available for Scotland for the first time.
8. Comments were also raised around why there was a low uptake of Varenicline in Scotland? The drug commonly known as Champix has been shown to be much more effective than NRT in helping people quit. Morris Fraser informed the group that the drug had been under scrutiny over apparent links to mental health

issues in the USA. The suspected link has now been disproven but there was likely to be some hesitation to prescribe it amongst some pharmacists and GPs.

9. Members of the public are also likely to have read scare stories about the drug and as one in three smokers have a mental health condition, there is likely to remain some reluctance to try the treatment. The uptake of electronic cigarettes by those attempting to stop smoking may have also kept the use of Varenicline lower than desired.

10. Dr McCallum added that there was also a lot of propaganda about the dangers of stopping smoking and the effectiveness of interventions. This is something she thinks should be looked into. Health Boards are also not always keen to spend money on smoking cessation products.

11. Professor Amos advised that there was evidence that disadvantaged smokers were less likely to be offered Varenicline. Although health inequalities were reducing this could be improved if the drug was more readily available to disadvantaged groups. **The Minister said that increasing the appropriate use of Varenicline should be an action point.**

12. Questions were also asked about the availability of data for the rates of quits using electronic cigarettes and the capture of data on people quitting out with services. Julie Landsberg advised that there is currently no specific data available around this other than the overall numbers of people who reported having given up each year as recorded in the Scottish Health Survey. The rate of people quitting overall in Scotland continued to rise year-on-year.

### **ITEM 3: Action Plan Report**

13. Morris Fraser gave a presentation which provided a report on the first year of the tobacco control Action Plan. He said that delivery of the Action Plan was not only for the Scottish Government but as a result of the work undertaken by all the people gathered round the table, and others, who collectively were making a difference.

A link to the presentation is attached for ease of reference.

14 In discussion the following points were made:

- a) The stop-smoking campaign, Getting Through 72 was aimed at tackling the feelings of some potential quitters who think it will be difficult and lengthy to give up smoking. The campaign is still being assessed for impact. This was one of many campaigns which have been supported by the Scottish Fire and Rescue Service - due to the prevalence of home fires caused by cigarettes;
- b) Directors of Public Health had made a recommendation that vaping should be permitted consistently across Scotland on hospital grounds but not near buildings;

c) If smoking were removed in Scotland, it would have the same effect as effect of lifting one in three children in the most deprived areas out of poverty;

d) The main focus of action in the second year of the Action Plan will be on prevention. A stocktake of all the activity currently going on is being undertaken. A forum has been set up to look at further ways we can help prevent people from taking up smoking.

15. Pete Cheema asked what budget was available for tackling illicit trade and highlighted that this was a problem for retailers and we should look at how to tackle this issue in a better way. It was highlighted that this was a reserved matter.

16. The Scottish Government were also asked what assistance it could provide to retailers to convert people to using vapes, noting that any assistance would be helpful. Morris Fraser said that the SG is aware of the importance to the economy of the retail sector, that we are alive to their concerns about reducing the number of smokers in Scotland and that we are willing to work with them.

17. The Minister asked how Pete Cheema would see that looking going forward, to which Mr Cheema replied that work was underway and that this warranted further discussion post meeting. This was **agreed by the Minister as an action point**.

18. Dr McCallum reminded those present that the WHO framework convention calls for all healthcare facilities to be smoke free rather than just hospitals and said that we should look at the issue of smoking across all these environments. She said tackling smoking around hospital buildings was the beginning of the process and there was a need to move on with this to try to implement wider coverage quickly.

19. Morris Fraser advised that we have three or four actions on that included in the Action Plan. Tackling smoking around Local Authority buildings, schools etc. were in our plans and we are looking at how to encourage businesses to see that it was in their best interests to help their staff quit. The focus for the next 12 months though, will be on prevention and we will move on to other healthcare environments these areas after that. Professor Bauld also volunteered that she is happy to help with the SG's work.

20. Sheila Duffy noted that we still need to be careful around messaging, keep it front and centre, about the risks and dangers of smoking tobacco.

21. John Lee enquired if the review on the Tobacco Register had taken place. Morris Fraser said that we do not currently have an action on this but a review of the register would normally happen after five years and that this would be linked to a review of the Track and Trace system. It was agreed that from a research point of view, the Tobacco Register had been a great help.

22. Pete Cheema said that his organisation was receiving numerous calls about the UK Government's Track and Trace system, which came into effect on 31 May 2019, and that retailers were finding the system difficult to use. It was highlighted that any issues with this system should be taken up with HMRC.

#### **ITEM 4: Sub-group Reports 2017**

23. Dawn Adamson reported on the work of Trading Standards. A link to the report is attached for ease of reference.

24. In discussion the following points were highlighted:

- a) Enforcement work around illicit tobacco and test purchasing continued in line with the targets that had been set by the Scottish Government. The failure rate from test purchasing remains around 10% by the rate of failure at follow-up visits was going down;
- b) The enforcement community welcomed the Scottish Government's continued support for this work;
- c) Local authorities continued to provide advice and helped with training retailers on Nicotine Vapour Product requirements and found compliance to be generally good;
- d) The tobacco detection dog continued. The dog was used by seventeen authorities last year to trace illicit tobacco;
- e) Local authorities noted that there were developments being made across the UK on digital ID as a way to provide proof of age for purchasing tobacco. While these could not be used in Scotland, authorities would want to keep up with developments in other parts of the UK.

25. Craig Sommers provided an update that his society's Environmental Health Group had reconvened at the beginning of March.

26. George Dodds gave an update on the prevention sub-group. The group has reconvened and are in the process of finalising the remit and membership of the group. It is considered a good model of how a sub-group should work. There have been two very productive meetings to date, sharing information and studies around young adults smoking, e-cigarettes and responsive work.

27. Professor Bauld provided an update that the research sub-group was a very vibrant sub-group and continued to inform us about relevant Scottish, UK and International research in the field of Tobacco Control. The group to date had had two meetings. Some of the group's members and been highly successful in raising funding over the last year, which reflected the continuing commitment to research and evidence on tobacco control in Scotland.

#### **ITEM 5: Next Steps**

28. Morris Fraser advised that the Scottish Government has committed to publishing two consultations in 2019. The first would be on smoking around hospital buildings. A summer consultation would allow for an autumn slot in Parliament with a view to introducing legislation early 2020. The second consultation would be on restrictions on the advertising and promotion of NVPs.

**ITEM 6: AOB**

29. Professor Haw provided an update that the international conference in June was now being postponed. However, it is hoped that the conference can be re-arranged to take place around the end of the year, which would be around the time of the first anniversary of prisons going smoke-free in Scotland.

30. It was also agreed that a doodle poll will follow with potential dates for the next meeting of the group.

**Stephen Young**  
**Tobacco Control Team**  
**11 June 2019**

## **SCOTTISH GROCERS' FEDERATION: MEETING WITH MINISTER, 4 JULY 2019 NOTE OF ACTIONS**

1. Mr FitzPatrick met Pete Cheema, OBE, Chief Executive and Dr John Lee, Head of Policy and Public Affairs (SGF) at the Scottish Parliament on 4 July 2019 (11:00 am).
2. Under Article 5.3 of FCTC Pete and John declared interest as a result of links to the tobacco industry. This precludes any actions which could lead to SGF influencing the development or implementation of public health policy.
3. SGF asked for the meeting to discuss tobacco control issues generally. SGF wished to provide an update on its own actions which it believed were aligned to the Government's aims and to raise awareness of the impact which tobacco control measures could have on the grocer sector.

### **Nicotine Vapour Products**

4. SGF asked about SG policy on nicotine vapour products (NVP) and for any details that were available on the proposed consultation to restrict advertising and promotion of NVP. SGF welcomed the proposal to allow advertising at point of sale but believe removing domestic advertising will restrict the growth of the market – this it believed would be counter-productive to the SG's aims on reducing smoking. SGF will be responding to the consultation when it is published and will make the points that it believes vaping is far less harmful than smoking and that there is no evidence of vaping being a gateway to smoking. It will oppose the proposed restrictions on advertising.
5. SGF believes vaping could help more people quit smoking and that grocers should be selling more vaping products and less tobacco products. Retailers have direct contact with smokers and could play an important part in converting people to a less harmful alternative. SGF believes Scottish Government could provide retailers with support to convert people from tobacco to NVP.
6. Minister pointed out that the Scottish Government could not fund retailers with links to the tobacco industry to promote an alternative to smoking, as this would be in breach of article 5.3 of FCTC. The Scottish Government is not pro-vaping. Nicotine is addictive and there are already medicinal products such as NRT which can help smokers to quit.

### **Digital Identification – proof of age**

7. SGF was interested in views on the adoption of new digital identification schemes which might be used in future as proof of age for age-restricted products such as alcohol and tobacco. Scotland has taken a unique approach to limiting the methods for proving age to only those in related legislation. SGF believes this will limit retailers' ability to check proof of age.

8. Changing all the relevant legislation in Scotland to allow as-yet un-tried digital proof of age schemes now being proposed in other parts of the UK is not currently a priority for the Scottish Government.

### **Track and Trace – HMRC scheme**

9. SGF believes there have been teething problems with the new HMRC track and trace scheme for tobacco. The scheme does not provide a consistent, effective system for retailers to report suspected illicit trade in tobacco.

### **Brexit preparations**

10. Mr Fitzpatrick was interested in what preparations retailers are making for brexit. SGF believes that the relatively short supply chains and quick turn over of stock means that stock piling will be unnecessary for grocers. There are likely to be shortages of some fresh produce. Some retailers may have stock-piled too early, and this will have affected internal markets. SGF believes there has not been enough focus on the impact Brexit will have on importing goods.

Tobacco Control Team  
Health Improvement Division  
July 2019