

Smoking Cessation Tower Hamlets

Presentation for Health and Adults Scrutiny Sub-Committee

3rd September 2024

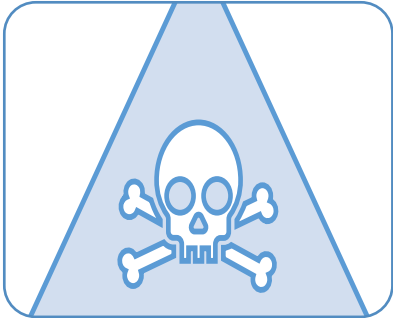
Liam Crosby – Associate Director Public Health (Healthy Adults)

Shamsia Foreman Begum, Specialist Stop Smoking Service Manager, (QuitRight Tower Hamlets, QMUL)

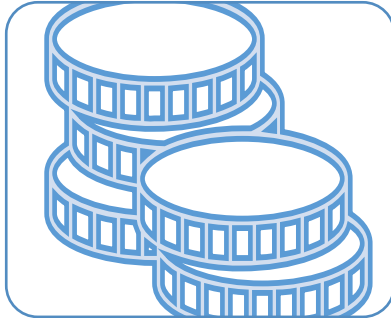
Syeda Begum, Community Tobacco Dependency Lead – East London Foundation Trust



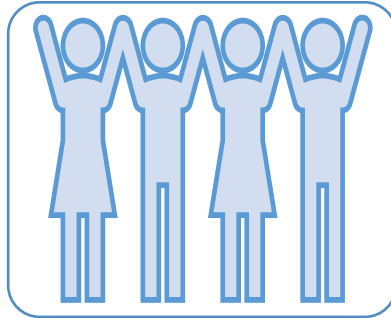
Why is smoking cessation important?



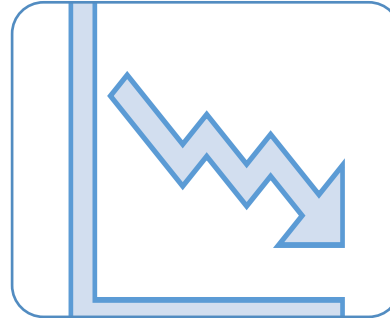
Smoking remains the leading cause of preventable illness and death, and still kills almost **75,000** people every year in England alone.



Smoking costs individuals and families, and costs society billions of pounds every year, with significant costs being borne by local councils and NHS, and other services.



The public overwhelmingly support action to address smoking.



In the last decade adult smoking prevalence has been reduced by over a quarter to its lowest ever recorded level of **12.7%** in England (2022), saving thousands of lives and years lived with disability.

Benefits of reducing smoking:

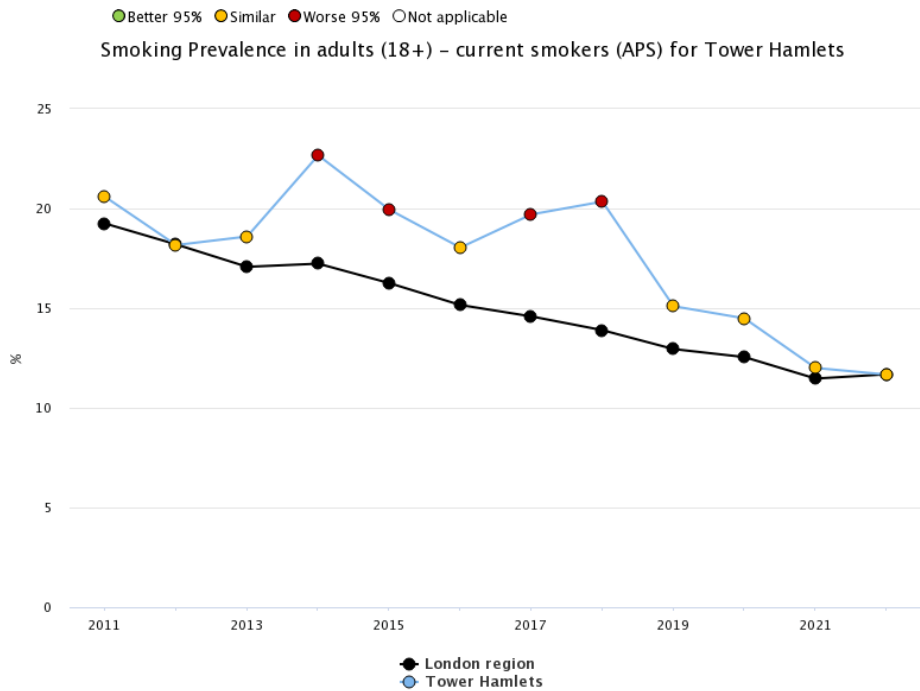
- save lives each year
- lift households out of poverty
- increase local productivity and economic prosperity
- reduce inequalities
- reduce burden on the NHS
- improve quality of life
- protect children from harm



Locally, we have seen big improvements



Overall, rates of smoking have fallen sharply in Tower Hamlets, from over 20% a decade ago, to 12% today. Tower Hamlets rates are now similar to London average

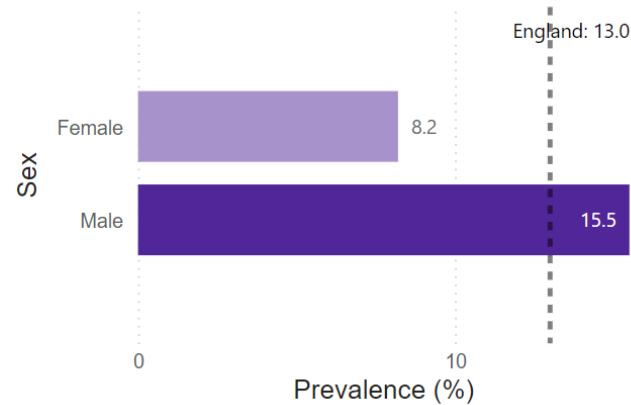


Source: Fingertips | Public health data

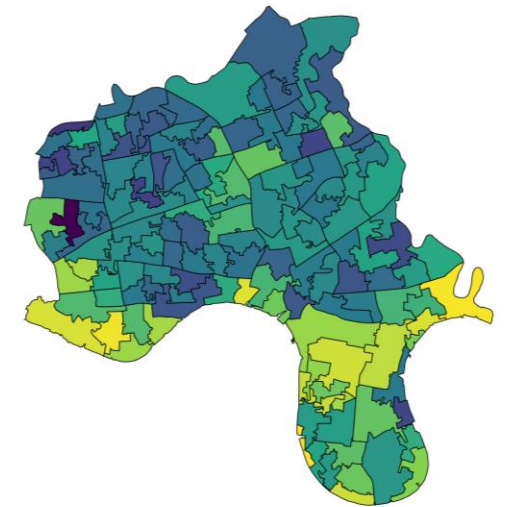
12.0
(%) prevalence of smoking in adults (2021)

England: 13.0%

Prevalence of smoking by sex (2021)



Smoking prevalence by LSOA, Tower Hamlets, 2021-22



Smoking prevalence
15% 20% 25%

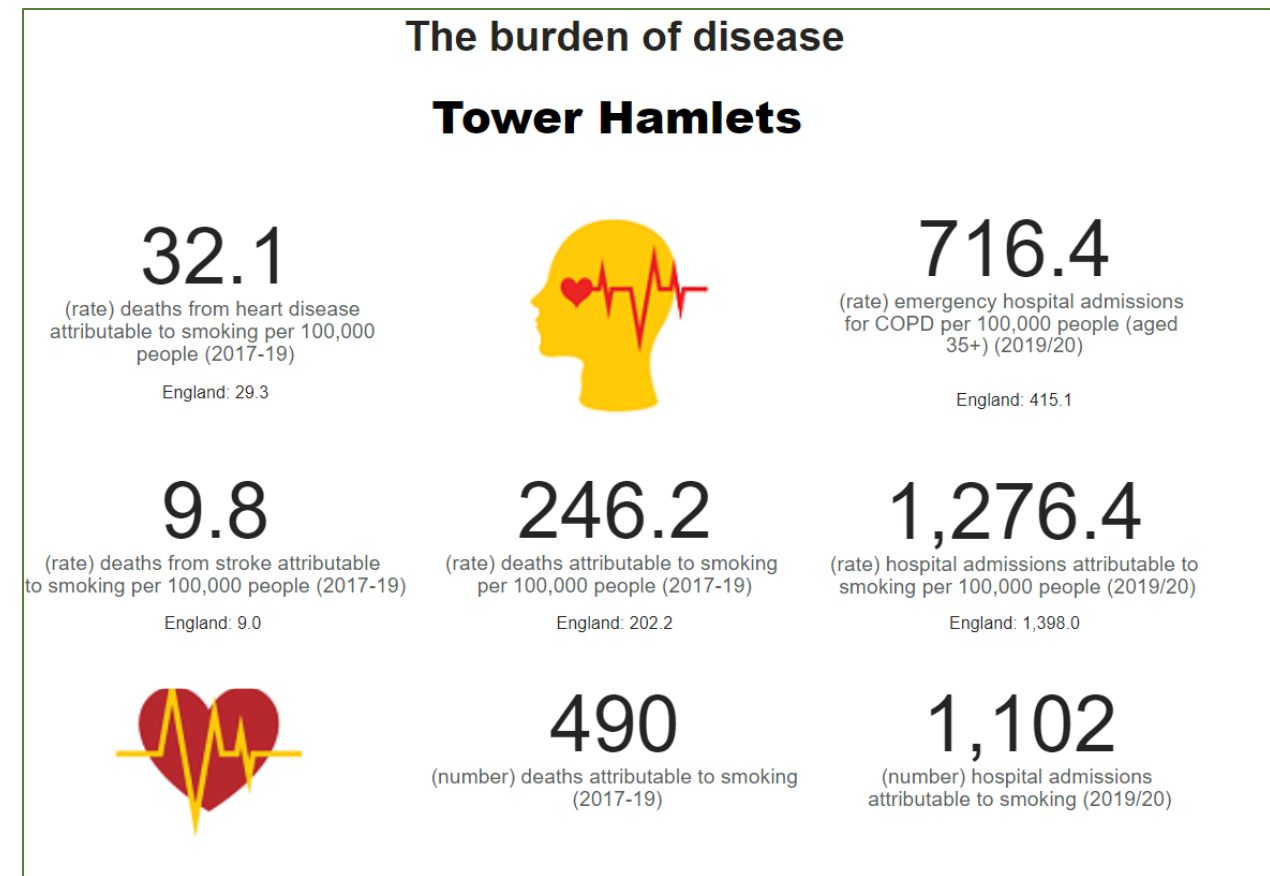
Source: East London Database



But smoking continues to be a substantial cause of death and disease in Tower Hamlets



- Smoking-related mortality per 100,000 has fallen, from a rate of **300**, to a rate of **246** (2017-19). This remains higher than London average.
- Rates of COPD admissions per 100,000 have fallen from over 900, to 716 (2019/20) – this is the highest in London.



Source: Fingertips, Tobacco Control Dashboard



In priority groups, smoking rates remain very high, with associated health harms



Routine / Manual workers

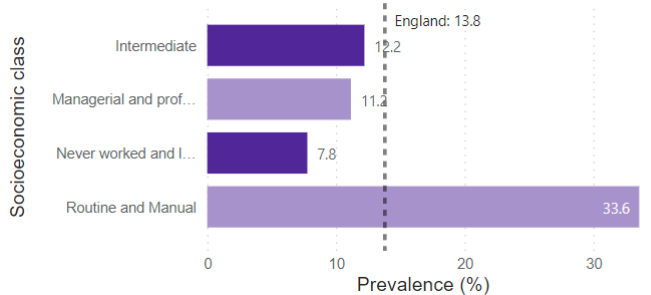
- Rates of smoking are 3x higher than in the general TH population.
- At 33%, rates are higher than London average.

33.6

(%) smoking prevalence in routine and manual occupations (2020)

England: 24.5%

Prevalence of smoking by socioeconomic class (2020)



Mental health

- Adults with registered long-term MH condition are 1.8 times more likely to smoke (28.2%) – this has declined over time
- Smoking among those with depression / anxiety is second-highest in London (33.4%)

33.4

(%) adults with anxiety or depression who are smokers (2016/17)

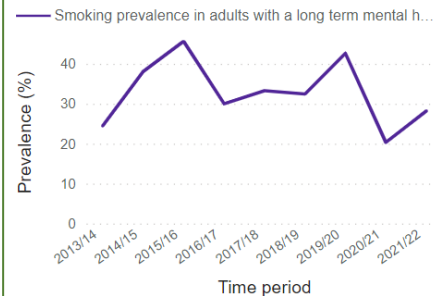
England: 25.8%

43.2

(%) adults with a serious mental illness are smokers (2014/15)

England: 40.5%

(%) adults with a long-term mental health condition are smokers from 2013/14 to 2021/22



1,094

(number) adults with a serious mental illness are smokers (2014/15)

28.2

(%) adults with a long-term mental health condition are smokers (2021/22)

England: 25.2%

Substance misuse

- Rates of smoking for those admitted to treatment are very high, and are higher than London averages.

53.3

(%) adults admitted to treatment for alcohol misuse are smokers (2019/20)

England: 43.9%

71.3

(%) adults admitted to treatment for alcohol and non-opiate misuse are smokers (2019/20)

England: 64.6%

80.3

(%) adults admitted to treatment for all opiate misuse are smokers (2019/20)

England: 70.2%



90

(number) adults admitted to treatment for alcohol misuse are smokers (2019/20)

107

(number) adults admitted to treatment for alcohol and non-opiate misuse are smokers (2019/20)

208

(number) adults admitted to treatment for all opiate misuse are smokers (2019/20)

Source: Tobacco Control Dashboard

The best of London
in one borough



Policy context, evidence base and funding sources

Liam Crosby, Associate Director Public Health (LBTH)



National policy: the Khan Review set recommendations for an ambitious agenda to make smoking obsolete

[The Khan review: making smoking obsolete](#) (Independent review into Smokefree 2030, by Dr Javed Khan OBE; published in June 2022)

Four critical recommendations are boxed in red. These are 'must dos' for the government to achieve a smokefree England by 2030, around which all other interventions are based.

Part 1: Invest Now

REC 1: Urgently invest £125m per year in interventions to reach smokefree 2030.

Option 1: Additional funding from within government
Option 2: A 'polluter pays' industry levy
Option 3: A corporation tax surcharge

Part 3: Quit for Good

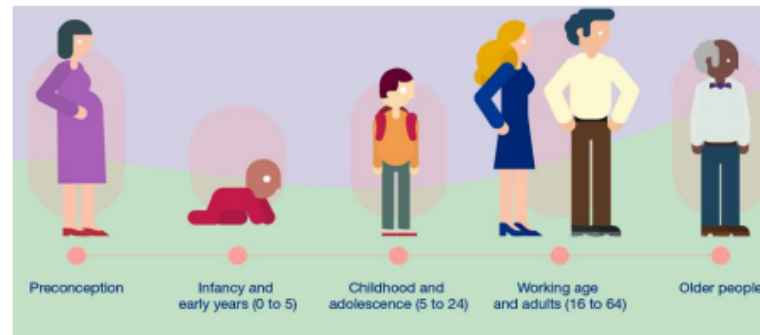
REC 8: Offer vaping as a substitute for smoking, alongside accurate information on the benefits of switching, including to healthcare professionals.

REC 9: Invest an additional £70 million per year into 'stop smoking services', ringfenced for this purpose.

REC 10: Invest £15 million per year in a well-designed national mass media campaign, supported by targeted regional media.

Part 2: Stop the Start

REC 2: Raise age of sale of tobacco by one year, every year.



The image above shows **the lifecycle of a smoker**. From smoking in pregnancy and the impact on the unborn baby, to old age, where 2/3 lifetime smokers will likely die from smoking. Interventions are needed at all stages of a person's life.

REC 3: Substantially raise the cost of tobacco duties (more than 30%) across all tobacco products, immediately. Abolish all duty free entry of tobacco products at our borders.

REC 4: Introduce a tobacco licence for retailers to limit where tobacco is available.

REC 5: Enhance local illicit tobacco enforcement by dedicating an additional funding of £15 million per year to local trading standards.

REC 6: Reduce the appeal of smoking by radically rethinking how cigarette sticks and packets look, closing regulatory gaps and tackling portrayals of smoking in the media.

REC 7: Increase smokefree places to de-normalise smoking and protect young people from second-hand smoke.

Part 4: System Change

REC 11: The NHS needs to prioritise prevention, with further action to stop people smoking, providing support and treatment across all its services, including primary care

REC 12: Invest £15m per year to support pregnant women to quit smoking in all parts of the country.

REC 13: Tackle the issue of smoking and mental health.

REC 14: Invest £8m to ensure regional and local prioritisation of stop smoking interventions through ICS leadership.

REC 15: Invest £2 million per year in new research and data, including investing £2 million in an innovation fund.



Evidence base for smoking cessation services

- People are most likely to quit smoking if they by use specialist help and stop smoking treatments (medication) together.
- Research shows that you're **around three times more likely to quit if you use treatments alongside stop smoking support**. For example, using a local stop smoking service and using nicotine replacement therapy (NRT) or e-cigarettes.



Funding and recent initiatives for Specialist Stop Smoking Services



Funding for community Stop Smoking Services comes from the Public Health Grant: we routinely invest £529,000 (additional funding has more recently been made available).

The NHS also fund Specialist Stop Smoking Services as part of the NHS Long-Term Plan which highlights that:

- By 2023/24, all people admitted to hospital who smoke will be offered NHS-funded tobacco treatment services.
- Model will also be adapted for expectant mothers, and their partners, with a new smoke-free pregnancy pathway including focused sessions and treatments.
- A new universal smoking cessation offer will also be available as part of specialist mental health services for long-term users of specialist mental health, and in learning disability services



Local smoking cessation services

1. Quit Right Tower Hamlets (local community smoking cessation service)
2. Barts Health – Royal London Hospital
3. East London NHS Foundation Trust



1. Quit Right Tower Hamlets

Shamsia Foreman Begum, Specialist Stop Smoking Service Manager, (Quit Right Tower Hamlets, QMUL)



Quit Right Tower Hamlets provides specialist, integrated Stop Smoking Services



- Prime Supplier model, with **Queen Mary University of London (QMUL)** providing the overall leadership, coordination and accountability for the full service.
- QMUL is expected to achieve ambitious 4-week quit targets (minimum: **1,275**, desirable: **1,500** per year).
- **Culturally tailored intervention:** free expert advice and behavioural support, along with stop smoking aids (a full range of free nicotine replacement products including patches, gums and e-cigarettes)
- **Eligibility:** smokers or smokeless tobacco users who are Tower Hamlets residents or those registered with a Tower Hamlets GP, or those who study or work in Tower Hamlets

Social marketing and training

Key campaigns: New Year, No Smoking Day, Ramadan, Stoptober
Very brief advice and stop smoking advisor training

Subcontracting

A minimum of three community pharmacies per locality subcontracted to deliver 15% of the corporate's quit targets

Specialist tobacco cessation service

KPIs set for priority groups: BAMEs, pregnant women, young people, people living with MH/SMI, people living with COPD, routine and manual workers, smokeless tobacco users

Service management

Service leadership, partnership working Inc. primary and secondary care, services or community groups supporting priority groups, other public health commissioned services, LBTH enforcement team, social housing suppliers etc.



Specialist Tobacco Cessation Service



Specialist Advisors and community Pharmacy provide,

- 8 week treatment and support
- Weekly telephone, text and face and face contact with an Advisor
- Combination NRT, Vape, Varenicline or Cytisine is offered
- Client focused tips, techniques and coaching offered
- Carbon monoxide testing
- Smokers can sign up to receive a free vape kit bundle and 'light touch' support from Quit Right Tower Hamlets
- Paan or Smokeless tobacco cessation also support by providing culturally sensitive approaches like language and same gender support.



Quit Right clinics and location details

- In person sessions based at 2 Stayners Road London E1 4AH
 - Open Monday to Friday from 9.00am to 5.00pm
- Regular face to face or telephone support offered at 15 GP Practices
 - in person at Mission, Limehouse Practice, Blithhale and Gough Walk
- 14 Community Pharmacy sites in Tower Hamlets
- Monday and Thursday Royal London Hospital / Smoking in Pregnancy partnership with Barts Health
- Town Hall – every Wednesday from 2.00pm to 4.30pm



Stoptober Campaign 2024

- We will be running Stoptober 2024 to promote the importance of quitting and how to access support.
- We are planning a targeted campaign to address the high smoking prevalence seen in some groups (Asian ethnicity, 35-54 olds, Males, E2/E3 postcodes, routine/manual workers, Females in White and Mixed ethnic groups)

Stoptober Planned Activities 2024

- 5 outreach stalls in East London Mosque, local markets and Blackwall Depot
- Targeted online training session for professionals to provide very brief advice (VBA)
- Digital communications (social media, bus stops, leisure centres)
- Text messages for registered smokers with SMI/MH needs from GP practices
- Case study videos/posters
- Utilizing behaviour change informed messaging



Swap to Stop Scheme



Evidence: Use of e-cigarettes as a treatment option has risen from 11% in 2019 to 67% in 2023.

Tower Hamlets has been successful with a tri-borough bid alongside the London Boroughs of Newham and Waltham Forest to bid for the government free vape scheme.

The scheme will encourage thousands of smokers in Tower Hamlets to swap cigarettes for vapes under the new 'swap to stop' scheme designed to cut smoking rates.

The Swap to Stop will be widely promoted during Stoptober and other national campaigns

SWAP TO STOP THIS NEW YEAR WITH A FREE VAPE KIT

For Adult Smokers in Tower Hamlets

Quit Right TOWER HAMLETS 18+

Queen Mary University of London

ONE KIT POD 3PCS

20mg

x2

x8

This product contains nicotine which is a highly addictive substance.

The advertisement features a blue and teal background. On the right, there is a product display including a box of 'ONE KIT POD' (3PCS), a black vape device, and a 20mg e-liquid bottle. A small black box with white text reads 'This product contains nicotine which is a highly addictive substance.' The text 'For Adult Smokers in Tower Hamlets' is in a black box. Logos for 'Quit Right TOWER HAMLETS' and 'Queen Mary University of London' are present. A circular '18+' age restriction symbol is also visible.



2. Smoking cessation services at Royal London Hospital

Liam Crosby, on behalf of Katie Gallagher, Barts Health head of Health Improvement



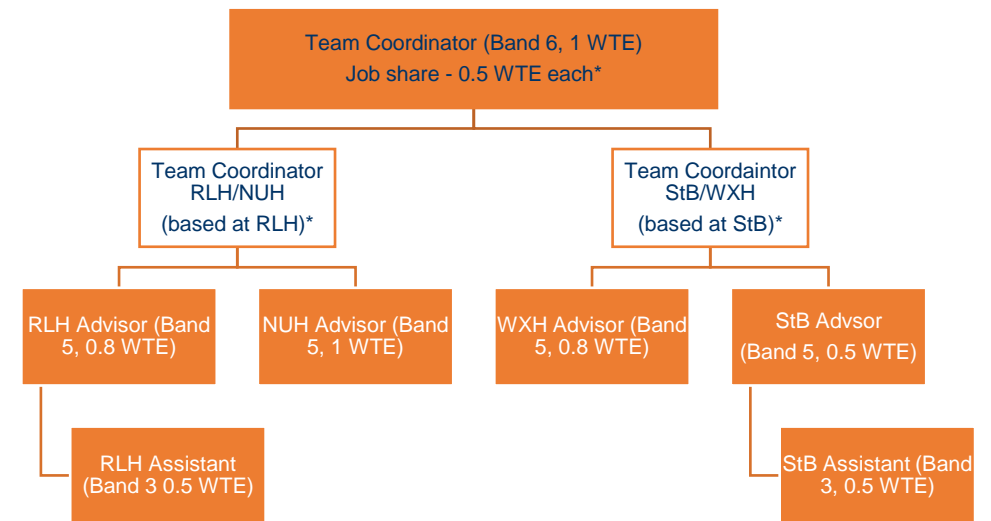
Tobacco Dependence Services at Barts Health



Overview:

- 'All acute Trusts should have an inhouse tobacco dependence service for hospital **inpatients** and **maternity**' (NHS Long Term Plan). Barts Health set up inhouse services in 2022, these are integrated into patient care, and work in partnership with QuitRight and local pharmacies. Interim service evaluations were complete, and work is underway to address recommendations.
- Staffing: There is 1 full time midwife for each hospital site working with an Advisor from Quitright. The inpatient team structure is shown visually on the right-hand side.
- 100% of pregnant women who are referred to the service are seen, and approx. 60% of hospital inpatients.
- **Challenges:**
 1. National funding stops in March 2025 and there is a risk that staff will leave due to lack of job security unless a long-term sustainable solution is agreed.
 2. Small team, so annual leave & other absence is not covered leaving gaps in service provision.
 3. The inpatient service also do not have enough capacity to see all patients referred.

Inpatient Tobacco Dependence Service staff structure



Inpatient Tobacco Dependence Patient

Smoking in Pregnancy Patient Pathway



R HAMLETS

Admitting team

During patient admission

ASK
the patient if they smoke and record smoking status
If the patient does smoke then...

ADVISE
the patient that the best way to stop is with a combination of specialist support and medication, and both are available at the hospital

ACT
an **opt-out** electronic referral to the local hospital tobacco dependence service and stop smoking medications prescribed / provided (ideally, NRT is provided within 2 hours of admission, as per trust protocol)

Tobacco dependence service

In-depth behavioural support

Tobacco dependence adviser attends to patient within 24 hours to provide an **in-depth opt-out stop smoking consultation** that includes:

- CO test and assessment of nicotine dependence (ideal scenario)
 - Assessment of patient's readiness and ability to quit
 - Informing the patient what support is available to quit
 - Informing the patient about withdrawal symptoms
 - Offer and recording of support to the patient
 - Where agreed, prompting commitment from the patient
 - Discussing preparations and providing a summary
- Where appropriate, revisit the patient to provide ongoing support or to review temporary abstinence to see if a full quit attempt can be started

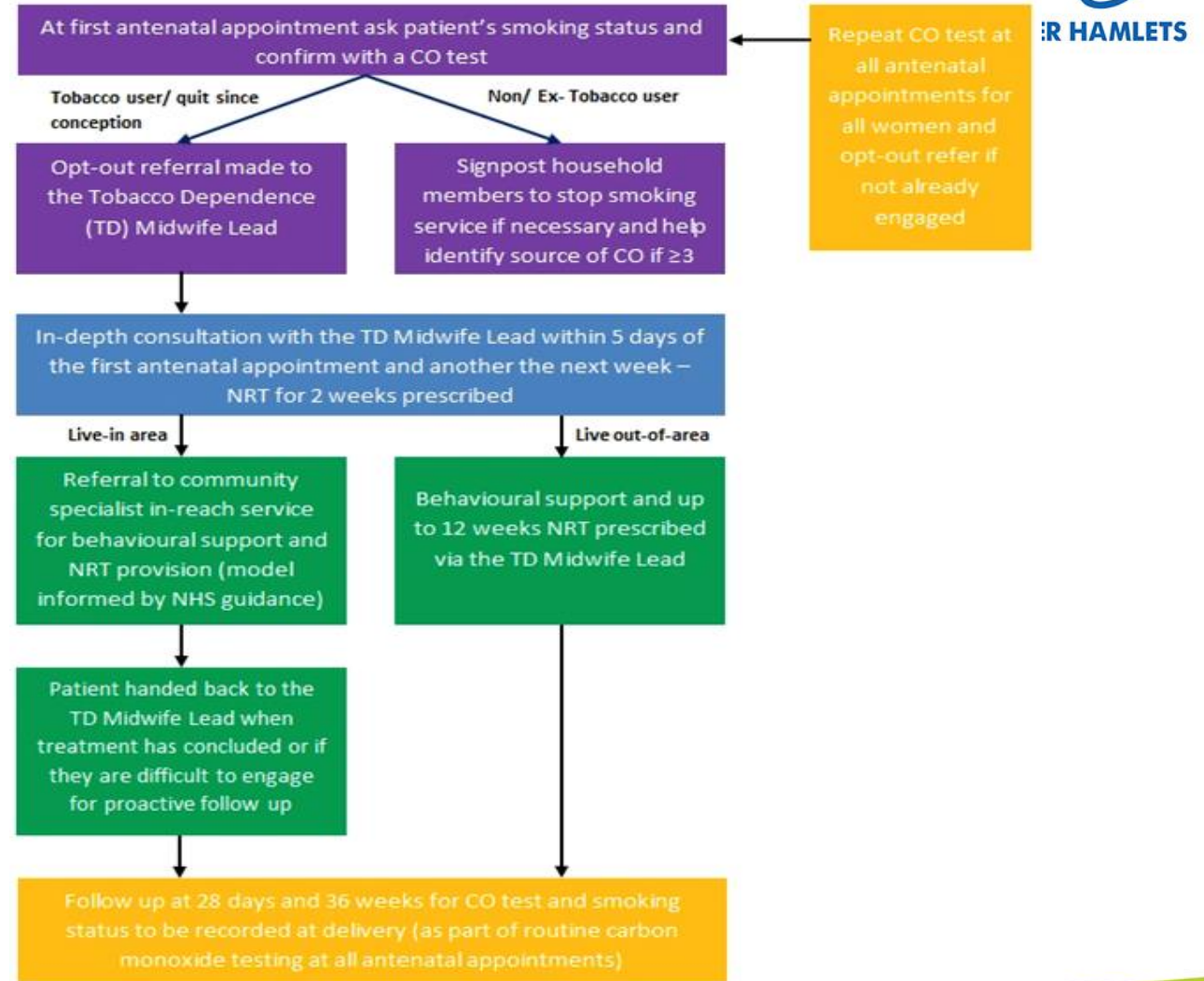
Ensure ongoing support upon discharge

Offer referral to ongoing stop smoking support in the community and, ideally, to a local authority Stop Smoking Service
+ provide one week's (minimum) worth of NRT
+ **communicate progress** with the patient's GP
+ ensure continuation of medication.

Provide follow-up call at 1 to 2 weeks post-discharge

Book and provide face-to-face follow-up appointment

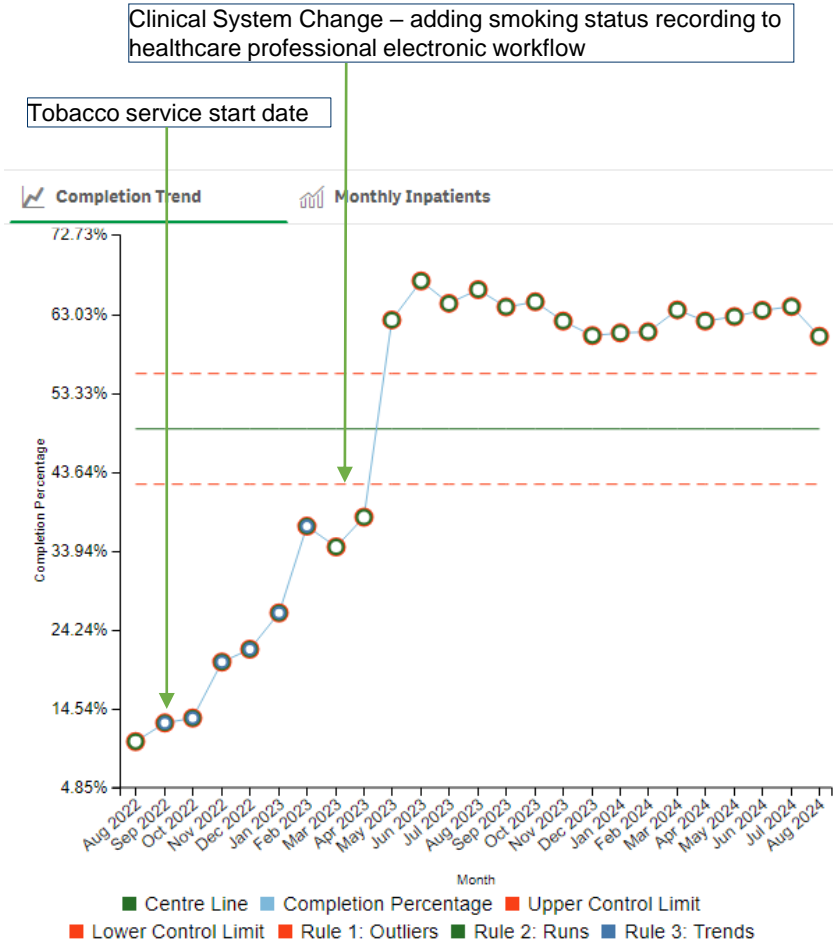
Tobacco dependence adviser books and delivers a **28 day follow-up**, ideally face to face, where smoking status is verified with a CO test or self-reported status is recorded over the phone



Performance – Inpatient Service 23/24



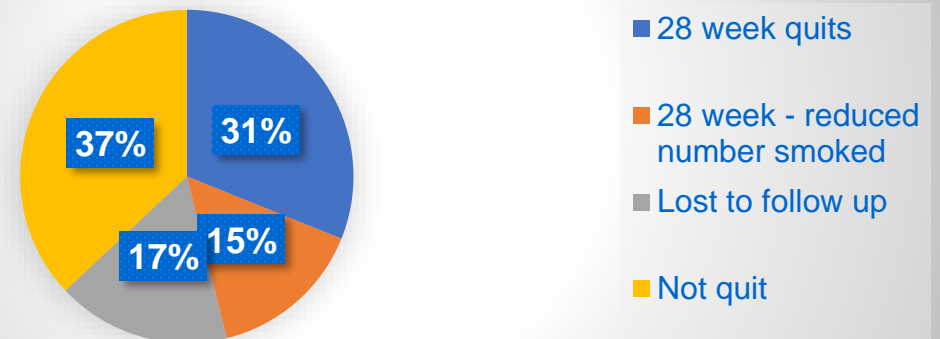
Proportion of inpatients with smoking status documented



Since the service start date we have seen an increase in documentation of smoking status on admission showing the service is integrated into routine care.

In 2023/24, the service received over 1500 referrals. Of which, 356 remained tobacco free post-discharge and 153 reduced the amount they smoked for harm reduction. This is a 20% conversion to quit rate for all referrals, and 31% for those who accept support, and can be compared to Manchester CURE (21% and 42%) which we use as a secondary care tobacco service to benchmark. There is work underway to reduce the number of ‘lost to follow ups.’

28 day quit outcome

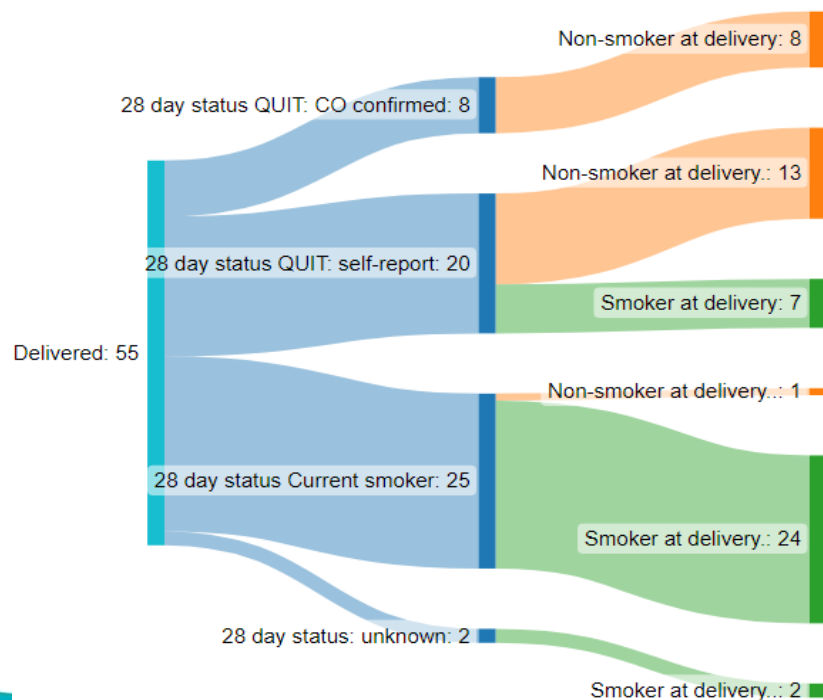


Performance – Smoking in Pregnancy

Findings from the interim service evaluation (16/11/2022 from service initiation to 31/8/2023) for the smoking in pregnancy service at Royal London Hospital:

% of booked individuals (1/10/22-30/9/23)	RLH
recorded as: - current smoker	2.6% (187)
- ex-smokers	7.7% (543)

Quit outcomes 28 day and at delivery



1 in 3 individuals referred to the service were recorded as a non-smoker at delivery.

Carbon Monoxide (CO) monitoring is an essential part of antenatal care and a case audit of 60 individuals who were 34-38 weeks' gestation found 98% of pregnant individuals had their CO measurement recorded at first booking appointment and 95% had their CO recorded at 36 weeks (any antenatal appointment between 34- and 38-weeks' gestation).

Following findings from the interim service evaluation there is work underway to bring the service in line with national pathway recommendations.



3. Smoking cessation services in East London NHS Foundation Trust

Syeda Begum

**Community Tobacco Dependency Lead – East London
Foundation Trust**



SMI Population Group

- ❑ There is a striking difference in the proportion of people who smoke in those who live with Severe Mental Illness (SMI) compared to the general population.
- ❑ Smoking trends for the general population show an overall decline since 2014/15, but the rates tend to be higher for people with more complex mental illness (UKHSA, 2020).
- ❑ In 2020/21 around 40% of those living with SMI smoke tobacco compared to 12% of the general population.

12% general population



40% severe mental illness



60-70%

Schizophrenia and
psychiatric inpatients



Services offered

ELFT Smoking Clinic Tuesdays

12:00 – 16:00 pm
86 Old Montague Street
London E1 5NN

Wednesdays

12:00 – 16:00 pm
2 Stayners Road London E1
4AH

Thursdays

10:00 – 13:00 pm
Virtual Clinic
MS Teams/ Telephone



Behavioural support + medication or a vape has been shown to significantly increase rates of quitting among people with SMI



Behavioural support from a trained professional



Stop smoking medication or nicotine containing vape

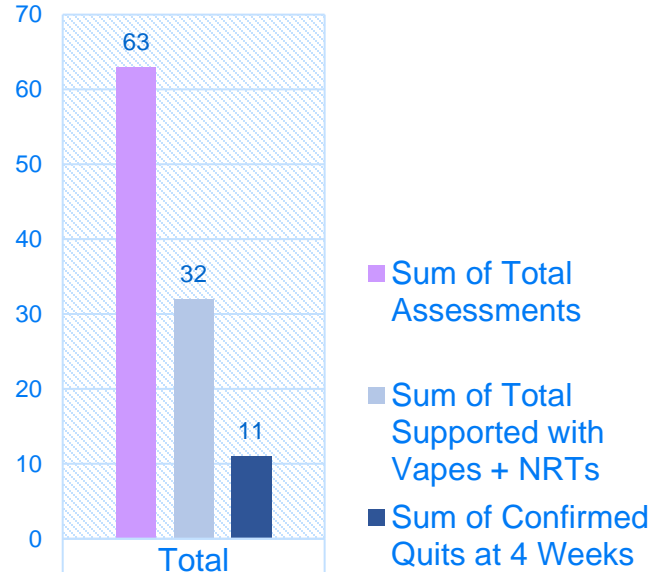
Bespoke smoking cessation interventions can further increase engagement with treatment and outcomes

Source: [Spanakis P, et al. 2021](#)



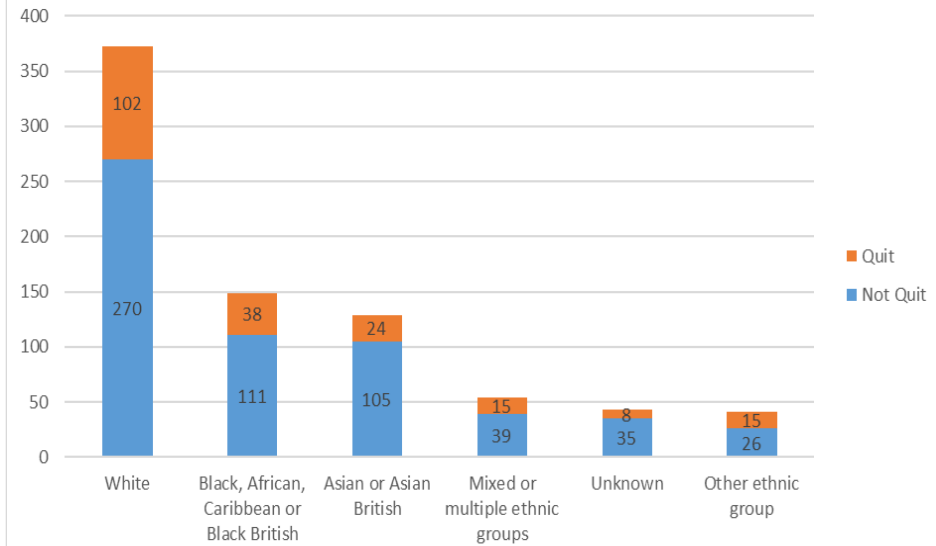
Outreach 2023 to 2024

ELFT Community Tobacco Dependency SMI 2023-24

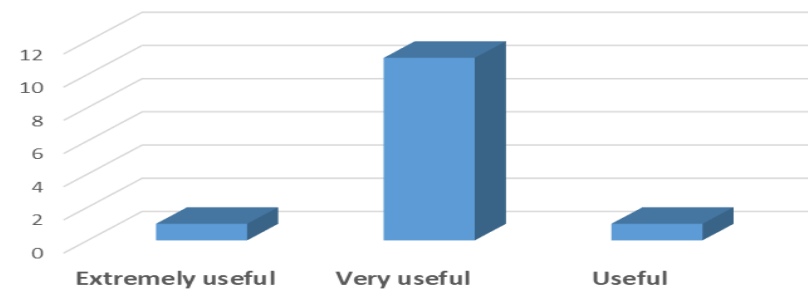


Sum of Total Assessments	63
Sum of Total Supported with Vapes + NRTs	32
Sum of Confirmed Quits at 4 Weeks	11

Smoking Support Outcomes Reported by Ethnic Group



Has the smoking cessation support sessions been useful?



ELFT Innovative Ideas

- ❑ ELFT delivers bespoke specialist training to community Staff in Level 1 and Level 2 Tobacco Dependency with the SMI population.
- ❑ ELFT has now added a virtual clinic on Thursdays for SMI patients who are physically unable to attend in person or have work commitments.
- ❑ ‘Just Ask’ campaign created to gain more referrals by encouraging staff to screen all patients they come into contact with.



JUST ASK



100% of service user quit rates were because staff asked them their smoking status.

Please just ask and make all referrals to
elft.stopsmoking@nhs.net

*include service users Name & RIO Number



Outcomes of our community smoking cessation services (QRTH), and future developments.

Liam Crosby, Associate Director Public Health (LBTH)



Quit Right Tower Hamlets - Service performance



- QRTH has strong performance against our targets set in our specification.
- The service achieves positive impacts for our residents at a higher rate than across London.
 - The rate of people setting a quit date is 57 per 1,000 smokers: significantly higher than the London and England average.
 - The rate of achieving 4-week quit (37 per 1,000 smokers) is also significantly higher than the London and England average

QMUL – QRTH 2023-24 data

	Set quit date	Successfully quit at 4 weeks	Quit rate
Total number of people access smoking cessation service	2378	1510	63%
Black, Asian and Minority Ethnic Groups (BAMEs)	1177	744	63%
Pregnant women	66	51	77%
MH/SMI	453	254	56%
Routine and manual workers	503	324	64%

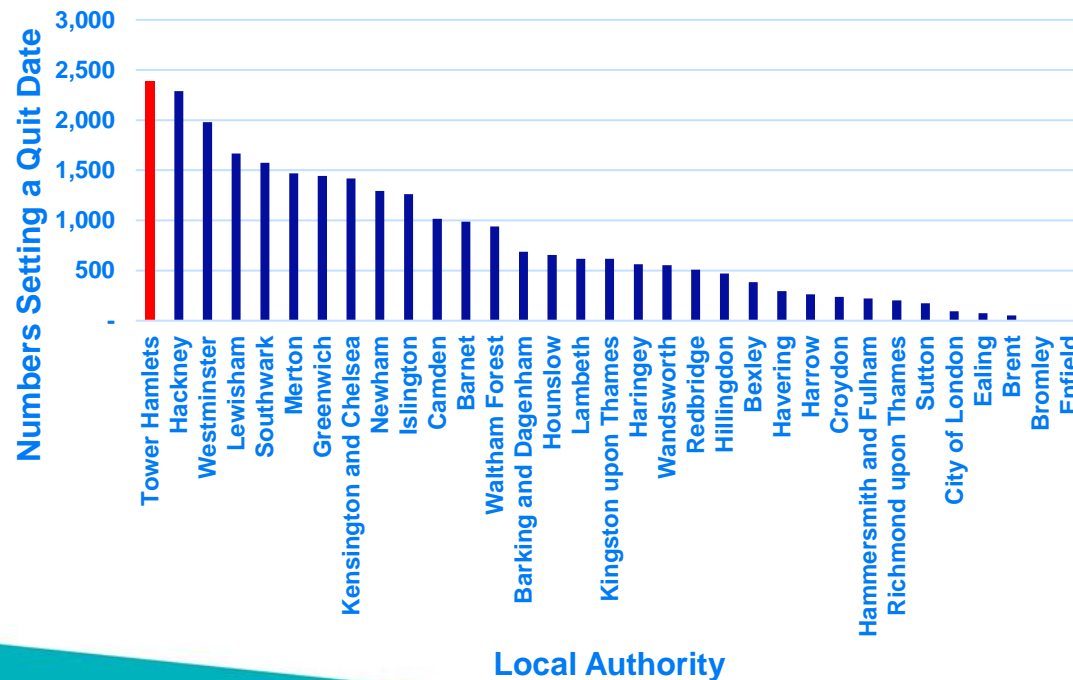


Tower Hamlets - Service performance – compared with other Boroughs

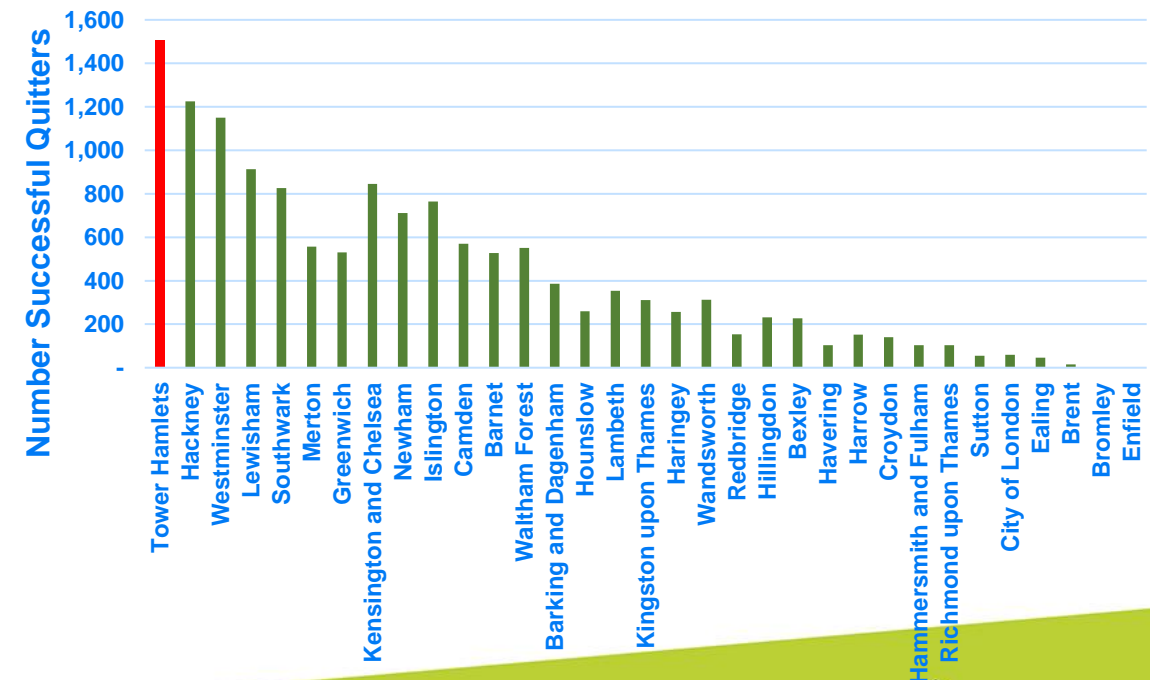


- In 2023-24, Tower Hamlets had greater number of smokers setting a quit date, and a greater number successfully quitting at 4 weeks, compared to other London Boroughs

Numbers Setting a Quit Date in London Boroughs
Apr 23 - Mar 24



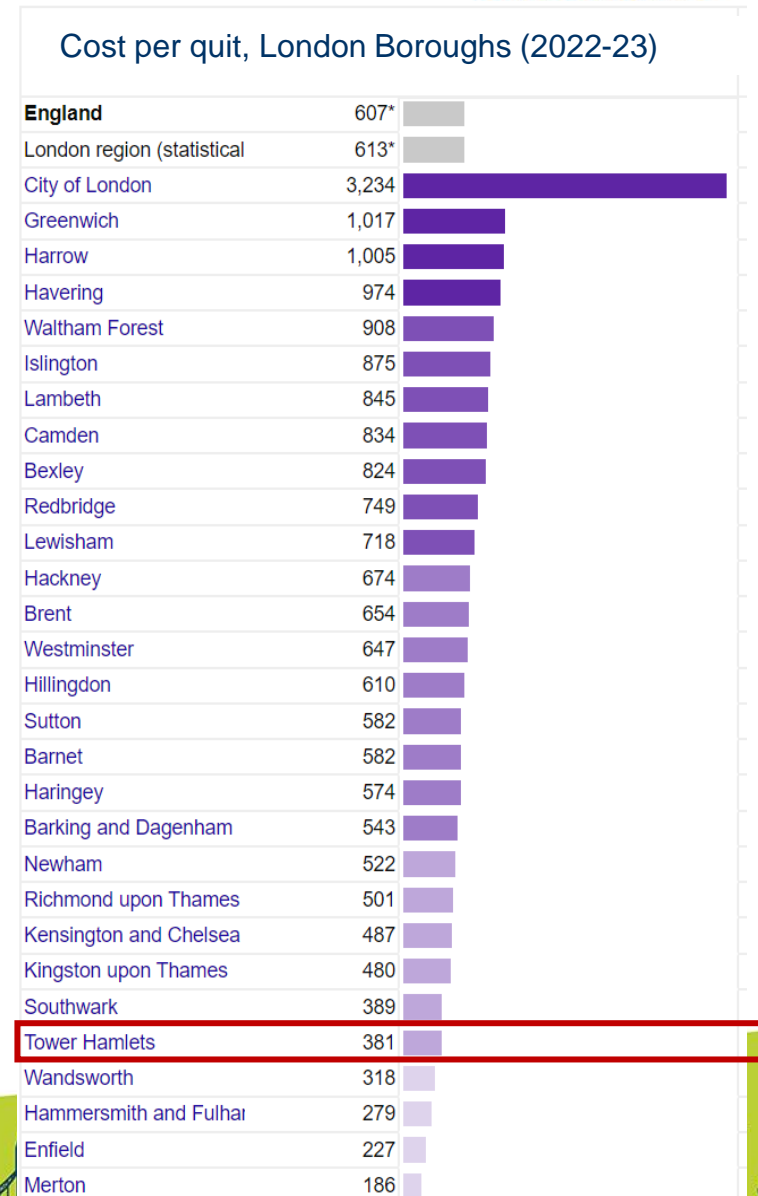
Successful quitters in London Boroughs Apr 23 - Mar 24



Investment and value for money on Stop Smoking Services



- Our investment in smoking cessation services totals £529,000 per annum.
- Achieving 1,510 quits last year (2023-24); this equates to **£353 cost-per-quit**. Public data shows Tower Hamlets achieves one of the most cost-effective cost-per-quit.
- Return on investment for smoking cessation services – benefits include:
 - Health benefits, reduction in mortality, lives transformed
 - Reduction in costs to economy (nationally smoking costs £17bn)
 - Reduction in costs to NHS (nationally smoking costs NHS £2.4bn)
 - Reduction in costs to LA services – eg Adult Social Care
 - Reduction in poverty (nationally 2.6m adults and 1m children would be lifted out of poverty)
 - Reduction in costs to other service – eg smoking was leading cause of LFB call-outs



Additional funding – Local Stop Smoking Grant



UK government have provided additional funding for local stop smoking services and support over the next five financial years until 2028/29 ([‘Stopping the start: our new plan to create a smokefree generation’](#)). Tower Hamlets have received additional grant funding of **£375,067** for local stop smoking services and support.

The additional funding is currently being used to help:

- Increase internal leadership, oversight and commissioning capacity under Healthy Adults Team.
- Contribute to the Pan-London digital pilot via London Tobacco Alliance/Stop Smoking London.
- Increase service capacity (Quit Right by QMUL) to help 990 more local smokers set a quit date in 2024/25, of which 150 will be from various disadvantaged groups e.g. service users of drug and alcohol treatment services, homeless hostels residents and rough sleepers, unemployed residents or people accessing Council’s employment support services, social housing residents.
- Improve the knowledge and skills of non-specialist staff including frontline workers by providing training.
- Improve established or establish new referral pathways to drive demand.
- Improve marketing and promoting local stop smoking services.
- Increase outreach provision through setting up co-located clinics in the RESET Drug and Alcohol support service, and in homeless and rough sleeper hostels.



Appendix 1 – further details on current performance of QRTH.



Social marketing and training / communication



Quit Right Tower Hamlets – specification/model

- Digital platform ([service website](#))
- Service branded public facing promotional materials.
- Minimum four campaigns per annum
- Support for promotion of smoke-free initiatives and health and wellbeing initiatives.
- A comprehensive training programme (minimum two sessions per quarter)

Current performance 23/24 Priorities to address going forward

- Relunched the service, with brand new designed website/ service promotional materials.
 - Ran Stoptober, New Year, No Smoking Day, Ramadan campaigns.
 - Outreach activities upon requests from stakeholders
 - Training delivered to social prescribers.
- Work with provider to improve website to capture more external events.
 - A pre-scheduled training programme, being promoted to wider stakeholders



Specialist tobacco cessation service, with a focus on priority groups



Quit Right Tower Hamlets – specification/model

- An easy to access specialist tobacco cessation services for all smokers and smokeless tobacco users, providing support for those from priority groups: BAMEs, pregnant women, MH/SMI, COPD, young people, LGBT+, substance misusers, routine and manual workers.
- Delivering 85% of the corporate’s quit targets i.e. between 1,084 and 1,275 quits per annum

Current performance 23/24

- High performance on KPIs – over 1,500 quits achieved
- Targets for BAME are achieved, and delivery specific for Pregnant women, MH/SMI.

Priorities to address going forward

- Engagement with groups under set quit targets: smokeless tobacco users, young people.
- Ensure regular delivery of co-located clinics within key community locations.



Sub-contracting community pharmacies



Quit Right Tower Hamlets – Current performance specification/model 23/24

- Sub-contracting community pharmacies (minimum three per locality), to deliver 15% of the corporate's quit targets i.e. between 191 and 225 quits per annum

Priorities to address going forward

- 14 community pharmacies sub-contracted

- Strengthen sub-contracting of pharmacies to ensure access within each Locality



Service management and pathways



Quit Right Tower Hamlets – specification

- Full range of pharmacotherapy products and vapes available and accessible.
- Establishing efficient referral pathways
- Establishing and maintaining effective partnership working with stakeholders
- Implementing re-engagement and service discharge pathways

Current performance 23/24

- Direct referrals from GPs, and established referral pathways with ELFT and Barts Health, as well as InHealth for TLHC programme
- EMIS (primary care data system) direct referrals mechanism
- Discharge pathway to tier 2 weight management service.
- Established self-referral process in place
- Established recruitment from advisors, and outreach events e.g. campaign activities

Priorities to address going forward

- Engaging with other potential partners such as RESET, rough sleepers / housing



Appendix 2 – Wider tobacco control



Whole-systems approach

- Addressing smoking requires a whole-systems approach and the following slides highlight other areas of work that are important to preventing illnesses from smoking.
- The following slides are additional to support understanding around what else happens in this area.



Enforcement

Public Health funds and works in collaboration with Trading Standards who conduct:

- Underage sales operations
- Illicit tobacco operations

Public Health has worked with Environmental Health in the past to create, support and enforce:

- Smoke free spaces



Smoke Free

- It has been illegal to smoke in enclosed public spaces since 2007 and Tower Hamlets has done significant work with small business owners to ensure compliance.
- From June 2015 all council managed children's playgrounds are considered smoke free spaces.
- From October 2015, under UK law, all private vehicles carrying passengers under 18 years old must be free from smoke.
- The council has historically run a smoke free pledge – encouraging people to keep cars and homes smoke free.



Do you want your home and car to be a smoke free zone? 



towerhamlets.gov.uk/stopsmoking



Underage Sales

- Trading Standards conduct underage sales test purchases each quarter.
- These include tobacco and vape sales, as well as alcohol.
- These operations are in collaboration with the police and are vital action against youth vaping.

Fines worth £1,500 issued after vape sold to a 14 year old



East London shop slapped with huge fine after sting operation catches worker selling £5 vape to child

The shop owner was ordered to pay a total of £1,600 in fines and court costs



Illicit Tobacco

- Operation Stromboli is Tower Hamlets' Trading Standards' operation to reduce the volume of illicit tobacco being sold in the borough.
- It also serves as a warning to shop owners that laws around the sale of tobacco are being enforced.
- The most recent operation seized:
 - 825 e-liquids
 - 5,731 cigarettes
 - 1,350g hand rolling tobacco
 - 259 sachets/packs Smokeless Tobacco

Pictures:

1. Large volume of non-compliant disposable vapes: oversized tanks and potential harmful contents (LBTH TS)
2. Counterfeit cigarettes hidden in washroom area of premises (LBTH TS)
3. Illicit tobacco hidden behind a fake fuse board (West Yorkshire TS)

1



2



3



Thank you all for your time

