

The “Ban” on Smoking in Enclosed Public Places and Workplaces

The Health and Regulatory Impact Assessment



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Impact Assessments

Economic - Consumers

- Business / Charities (RIA)
- State Aid
- Public Expenditure

Social

- Equality (Section 75)
- New TSN

Human Rights

Victims

Community Safety

Other

Health Impact Assessment

Rural Proofing

Environmental

- Climate Change
- Air Quality
- Landscape
- Use of Natural Resources
- Biodiversity
- Noise

INTEGRATED IMPACT
ASSESSMENT

Health Impact Assessment

Cost Benefit Analysis 3 Options

1. Status Quo – let companies decide own smoking policies (baseline)
2. Partial “Ban” – Smoke free enclosed public places and workplaces with exemption for pubs and clubs who do not prepare and serve food.
3. Full “Ban” – All enclosed public places and workplaces smoke free.



Health Impact Assessment

Main Policy Message - The protection of worker's health while they are in the work place.

1. Assess number of lives saved and sickness levels reduced (work)
2. Measure Savings to the NHS from reduced mortality and morbidity
3. Calculate the costs of introducing the Policy

Regulatory Impact Assessment

4. Identify and determine the impact on business



Health Impact Assessment

Problems

Smoking History not recorded on death certificates

Lack of agreement on diseases caused by smoking

Lack of Northern Ireland data / Studies

Solution

Adopted Scottish Executive approach

Health Economic Research Unit Analysis (University of Aberdeen)

“International Review of Economic Impact of Regulation of Smoking in Public Places”

SHS – Jamrozik (2005) BMJ article

“Estimate of deaths attributable to passive smoking among UK adults”



Health Impact Assessment

Deaths Avoided (annual)

		Smokers	SHS	Total
Partial Ban	LC, IHD & Stroke	23	10	33
	Extra Diseases	16	N/A	<u>16</u>
				49
Full Ban	LC, IHD & Stroke	27	13	40
	Extra Diseases	19	N/A	<u>19</u>
				59

HPSS Savings (annual)

	LC, IHD & Stroke	inc Extra Diseases
Partial Ban	£2.7m	£3.5m
Full Ban	£3.2m	£4.1m



Net Present Value analysis – 30 year

		Three main smoking related diseases NPV in 2006 prices (£m) based on 30 year		All identified smoking related diseases NPV in 2006 prices (£m) based on 30 year	
		Option	Partial	Full	Partial
Health Benefits					
Economic value of lives saved	Reduced Exposure to ETS	51.49	59.25	51.49	59.25
	Reduced Active Smoking	104.83	123.06	177.76	209.66
Morbidity Saving (Human Cost of ill health)	Reduced Exposure to ETS	131.89	156.26	131.89	156.26
	Reduced Active Smoking	31.48	37.26	101.99	120.69
Resource Savings					
NHS Treatment Costs		29.36	34.67	37.38	44.42
Reduced Sickness Absence Savings		4.77	6.50	4.77	6.50
Productivity gains as a result of reduced smoking breaks		437.73	518.66	437.73	518.66
Cost savings from reduced fire hazards and reduced cleaning and decorating costs		71.73	84.60	71.73	84.60
Hospitality Sector Impacts		-33.11	-45.98	-33.11	-45.98
Implementation and Enforcement Costs					
Costs to the Northern Ireland Administration		-35.74	-47.36	-35.74	-47.36
Costs to Local Authorities		-5.91	-5.91	-5.91	-5.91
Total NPV		788.52	921.02	939.97	1,100.81



Monitoring

To determine change in SHS exposure in Children	Self Report and Cotinine samples Baseline Jan 07-April 07 - Follow up early 08
	Questions on Young People Behaviour and Attitude survey (age 11-16) 2003 compare with responses in autumn 2007
To determine changes in SHS exposure in non Smoking adults	Adult self report + air nicotine measurement in 84 homes. Follow up +12 mths
	Continuous Household Survey - restrictions on home smoking
To measure the change in air quality and air nicotine in public bars – level of exposure for bar workers	Air nicotine analysis in 2 cities, 1 medium size town and 1 small town. Baseline Feb 07 – March 07. Follow up after 6 Weeks and 1 year



Monitoring (cont)

To determine changes in smokers and non smokers attitudinal and behaviour response to smoke free laws	Continuous Household survey April 07 – 08.
Monitor adult smoking prevalence	CHS - ongoing
To determine the effects of ban on quitting	New module in CHS. April 07
	Analysis of smoking cessation services (live cessation database)
To assess young peoples change in smoking experimentation & attitudes towards smoking & quitting	Survey autumn 07
To determine the effects of smoking ban on drinking patterns	Drinking patterns survey. Base Nov 05 follow up poss Nov 08



Monitoring (cont)

To determine short term changes in measures/ population health. (CHD, respiratory disease, stroke etc	Secondary analysis of routine data sets. Baseline Jan 07 Follow up Jan 08
Tobacco related hospital admissions Smoking related deaths	Need to establish set of diseases. GRO
Short and long term economic impact on hospitality sector	Pre and post analysis of Employment, turnover, profitability, openings and closures. All business – sick absence
Compliance	Recording of no of visits, compliance and prosecutions

